

# EXHIBIT D

All [REDACTED]				EFF [REDACTED] TODAY [REDACTED]
EST BILLING FOR TERM		\$130.20	TIER CL TERM S	FROM [REDACTED] TO [REDACTED]
VEH1	[REDACTED]	RERATED	[REDACTED]	
COMP		100	42.60	
ACC				
COLL		100	129.00	
PD	10000	93.60	10000	93.60
BI	15/30	150.00	15/30	150.00
UMBI	15/30	45.60	15/30	45.60
UMPD	10000	INCL	10000	INCL
PIP	FULL	120.00	FULL	120.00
INSD				
APIP				
LOU		30/600	18.00	
TOTAL	409.20	TOTAL	598.80	

POLICY FILING FEES: \$0.00

DRVR/TERR	EVELYN/012	EVELYN/012
RF/PTS/RS	/00/23	/00/23
BY: SX: MS: P/O	[REDACTED]	[REDACTED]
CLG: ADULT: USE	[REDACTED]	[REDACTED]
DISCOUNTS	[REDACTED]	[REDACTED]

OLD POLICY PREM \$409.20 NEW POLICY PREM \$598.80  
 ENTER N1 FOR RATING AS OF THE NEXT RENEWAL

CHANGE CD

108

A11 [REDACTED] EFF [REDACTED] 4 TODAY [REDACTED]  
 EST CREDIT FOR TERM [REDACTED] \$131.30 TIER CL TERM S FROM [REDACTED] TO [REDACTED]  
 VEH1 [REDACTED] RERATED [REDACTED]  
 COMP 100 42.60 CNW  
 ACC  
 COLL 250 114.00 CNW  
 PD 10000 93.60 10000 93.60  
 BI 15/30 150.00 15/30 150.00  
 UMBI 15/30 45.60 15/30 45.60  
 UMPD 10000 INCL 10000 INCL  
 PIP FULL 120.00 FULL 120.00  
 INSD  
 APIP  
 LOU 10/200 6.00 CNW  
 TOTAL 571.80 TOTAL 409.20

POLICY FILING FEES: \$0.00

DRVR/TERR EVELYN/012 EVELYN/012  
 RF/PTS/RS /00/23 /00/23  
 BY: SX:MS:P/O [REDACTED]  
 CLG: ADULT:USE [REDACTED]  
 DISCOUNTS [REDACTED]

OLD POLICY PREM \$571.80 NEW POLICY PREM \$409.20  
 ENTER N1 FOR RATING AS OF THE NEXT RENEWAL

CHANGE TD

A36 [REDACTED] VEHICLE SCREEN EFF [REDACTED] TODAY [REDACTED]  
 FROM [REDACTED] TO [REDACTED]  
 VEHICLE 1 ACTION COVERAGE RATE ADDTL COST  
 VT MY MAKE SERIES BODY STYLE VEHICLE ID NUMBER SYMBOL ALT PI AMOUNT NEW  
 [REDACTED]  
 [REDACTED]  
 ENG S/ PASSIVE COMMUTE ANNL REG MLT SUB  
 SIZE DAMAGE RT RESTRAINT USE MILE/WK MILE OWN CAR CLSS  
 [REDACTED]  
 [REDACTED]  
 [REDACTED]  
 RATED BIRTH MART DRVR RES YD GOOD DEF CAR VEH RATE  
 DRIVER DATE SEX STAT TYPE CHLD ADLT STDT SR DRVR POOL TIER SNR FCTR  
 [REDACTED]  
 [REDACTED]  
 COVERAGES  
 COMP 100 42.60 CNW INSD CNW  
 ACC CNW APIP  
 COLL 250 114.00 CNW LOU 10/200 6.00 CNW  
 PD 10000 93.60  
 BI 15/30 150.00  
 UMBI 15/30 45.60  
 UMPD 10000 INCL  
 PIP FULL 120.00  
 TOTAL 571.80

CHANGE CD

## AUTO POLICY CHANGE REQUEST

DATE PREPARED: 06  
 CHANGE EFF DATE: 06  
 POLICY EFF DATE: 06  
 POLICY EXP DATE: 1

POLICY NUMBER: [REDACTED]

POLICY HOLDER: [REDACTED]

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED, PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

## NATIONWIDE ASSURANCE COMPANY (10723)

VEHICLE #1  
[REDACTED]

COMPREHENSIVE	100
COLLISION	100
PROPERTY DAMAGE	10000
BODILY INJURY	15/30
UNINSURED MOTORIST--BODILY INJURY	15/30
UNINSURED MOTORIST--PROPERTY DAMAGE	10000
PERSONAL INJURY PROTECTION	FULL
LOSS OF USE	30/600

HOBAN INSURANCE AGENCY  
 18 HICKORY STREET  
 P O BOX 70  
 FRANKFORD, DE 19945  
 PHONE (302) 732-9505

5774

DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.  
[REDACTED]

A06 [REDACTED] VEHICLE SCREEN EFF [REDACTED] TODAY 0 [REDACTED] 3  
 H [REDACTED] FROM [REDACTED] TO [REDACTED]  
 VEHICLE 1 ACTION CHANGE C RATE HI ADDTL COST  
 VT MY MAKE SERIES BODY STYLE VEHICLE ID NUMBER SYMBOL PER PI AMOUNT NEW

ENG PASSIVE COMMUTE ANNL MLT SUB  
 SIZE DAMAGE RESTRAINT USE MILE/WK MILE CAR CLSS

RATED BIRTH MART DRVR RES YD GOOD DEF CAR VEH RATE  
 DRIVER DATE GEN STAT TYPE CHLD ADLT STDT SR DRVR POOL TIER SNR FCTR

## COVERAGES

COMP	100	128.40	INSD		
ACC			APIP		
COLL	250	299.40	LOU	10/200	6.00
PD	10000	287.40			
BI	15/30	426.60			
UMBI	15/30	19.80			
UMPD	10000	INCL			
PIP	FULL	181.80			

TOTAL 1349.40

INQUIRE CD (CH TO CHANGE)

*Included ID Card*

A36 [REDACTED] VEHICLE SCREEN EFF [REDACTED] TODAY [REDACTED]  
 H [REDACTED] FROM [REDACTED] TO [REDACTED]  
 VEHICLE 2 ACTION REQUEST RATE HI ADDTL COST  
 VT MY MAKE SERIES BODY STYLE VEHICLE ID NUMBER SYMBOL PER PI AMOUNT NEW  
 [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]  
 ENG PASSIVE COMMUTE ANNL MLT SUB  
 SIZE DAMAGE RESTRAINT USE MILE/WK MILE CAR CLSS  
 [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]  
 RATED BIRTH MART DRVR RES YD GOOD DEF CAR VEH RATE  
 DRIVER DATE SEX STAT TYPE CHLD ADLT STDT SR DRVR POOL TIER SNR FCTR  
 [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]  
 COVERAGES  
 COMP \_\_\_\_\_ INSD \_\_\_\_\_  
 ACC \_\_\_\_\_ APIP \_\_\_\_\_  
 COLL \_\_\_\_\_ LOU \_\_\_\_\_  
 PD 10000 58.80 \_\_\_\_\_  
 BI 15/30 95.40 \_\_\_\_\_  
 UMBI 15/30 19.80 \_\_\_\_\_  
 UMPD 10000 INCL \_\_\_\_\_  
 PIP FULL 76.20 \_\_\_\_\_  
 TOTAL 250.20

CHANGE CD

A03 AUTO RATE QUOTE #1 - COVERAGES  
NAME: [REDACTED]

ST [REDACTED] EFF DATE [REDACTED]  
AGT ID [REDACTED]

COMP	100	50.40
COLL	250	122.90
PD	10000	51.60
BI	15/30	83.80
DB	DB	.70
UMBI	15/30	21.00
UMPD	10000	INCL
PIP	FULL	35.80
INSD		
APIP	CNW	
LOU	BROAD	12.00
T&L	T&L	1.50
CB	CNW	
PE		

TOTAL 379.70

DR:CG:ADLT [REDACTED]

RF/SC/TIER [REDACTED]

BY: SX:MS: P/O [REDACTED]

USE:RS [REDACTED]

DISCOUNT [REDACTED]

CURRENT TOTL/INST \$379.70 / \$192.85

<PREV PG> CLASS <NEXT PG> QUOTE #2 <TAB> CHANGE

<GO> TO SELECT QUOTE #1



A03 AUTO RATE QUOTE #1 - COVERAGES  
NAME: [REDACTED] ST [REDACTED] EFF DATE [REDACTED]  
AGT [REDACTED]

COMP	100	45.80
COLL	250	111.70
PD	10000	46.90
BI	15/30	76.20
DB	DB	.60
UMBI	15/30	19.10
UMPD	10000	INCL
PIP	FULL	32.50
INSD		
APIP	CNW	
LOU	BROAD	12.00
T&L	T&L	1.50
CB	CNW	
PE		
TOTAL		346.30
DR:CG:ADLT	[REDACTED]	
RF/SC/TIER	[REDACTED]	
BY: SX:MS:P/O	[REDACTED]	
USE:RS	[REDACTED]	
DISCOUNT	[REDACTED]	
CURRENT TOTL/INST	\$346.30 / \$176.15	

<PREV PG> CLASS <NEXT PG> QUOTE #2 <TAB> CHANGE <GO> TO SELECT QUOTE #1

## AUTO POLICY CHANGE REQUEST

DATE PREPARED:  
 CHANGE EFF DATE:  
 POLICY EFF DATE:  
 POLICY EXP DATE:

POLICY NUMBER:  
 POLICY HOLDER:

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED, PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

## NATIONWIDE MUTUAL INSURANCE COMPANY (23787)

COMPREHENSIVE ACV  
 COLLISION 100  
 PROPERTY DAMAGE 10000  
 BODILY INJURY 15/30  
 DEATH BENEFITS DB  
 PERSONAL INJURY PROTECTION FULL  
 LOSS OF USE 25/800  
 TOWING AND LABOR T&L

POLICY COVERAGE  
 UNINSURED MOTORIST--BODILY INJURY 15/30  
 UNINSURED MOTORIST--PROPERTY DAMAGE 10000

THIRD PARTY:

*Sarah J. Halpern*  
 HOBAN INSURANCE AGENCY

5774

DATE

18 HICKORY STREET  
 P O BOX 70  
 FRANKFORD, DE 19945  
 PHONE (302) 732-9505

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.

ALL REVIEW 1 OF 1 [REDACTED] CHANGE EFF DATE [REDACTED]  
 NEXT RENEWAL [REDACTED] ESTIMATED BILLING FOR TERM [REDACTED] TO 01 TERM S

VEH [REDACTED]		VEH [REDACTED]		
COMP	ACV	56.40	ACV	53.30
COLL	100	148.40	100	140.00
PD	10000	40.80	10000	38.70
BI	15/30	63.90	15/30	61.30
DB	DB	.40	DB	.40
PIP	FULL	39.30	FULL	37.30
INSD				
APIP				
ADDL	LOU, TL	18.00	LOU, TL	16.70
PE				
TOTAL		367.20		347.70
UMBI	15/30	23.00	15/30	21.40 -POLICY COVERAGE
UMPD	10000	INCL	10000	INCL -POLICY COVERAGE
FILE FEE/FB/AG				FB
POL DISC [REDACTED]				
CHARGES [REDACTED]				
RATED DRV [REDACTED]				
#A:#MA:#MI [REDACTED]				

OLD POLICY PREM \$390.20 NEW POLICY PREM \$369.10  
 ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

CHANGE CD

ALL REVIEW 1 OF 1 [REDACTED] CHANGE EFF DATE [REDACTED]  
 NEXT RENEWAL [REDACTED] ESTIMATED BILLING FOR TERM CO 01 TERM S [REDACTED]

	VEH 1 [REDACTED]		VEH [REDACTED]	
COMP ACV	53.30	ACV	53.30	
COLL 100	140.00	100	140.00	
PD 10000	38.70	10000	38.70	
BI 15/30	61.30	15/30	61.30	
DB DB	.40	DB	.40	
PIP FULL	37.30	FULL	37.30	
INSD				
APIP				
ADDL LOU, TL	16.70	LOU, TL	16.70	
PE				
TOTAL	347.70		347.70	
UMBI 15/30	21.40	15/30	21.40	-POLICY COVERAGE
UMPD 10000	INCL	10000	INCL	-POLICY COVERAGE
FILE FEE/FB/AG	FB		FB	
POL DISC [REDACTED]				
CHARGES	[REDACTED]			
RATED DRV	[REDACTED]			
#A:#MA:#MI	[REDACTED]			

OLD POLICY PREM \$369.10 NEW POLICY PREM \$369.10  
 ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

CHANGE CD

**AUTO-MEMORANDUM OF INSURANCE**

POLICY NUMBER: [REDACTED]  
POLICY HOLDER: [REDACTED]

POLICY EFF DATE: [REDACTED]  
POLICY EXP DATE: [REDACTED]

**IMPORTANT NOTICE**

THIS MEMORANDUM OF INSURANCE PROVIDES BASIC INFORMATION REGARDING COVERAGE AND INTERESTS PROTECTED BY YOUR POLICY AS OF 01/11/05.

**NATIONWIDE MUTUAL INSURANCE COMPANY (23787)**

VEHICLE #2  
[REDACTED]

COMPREHENSIVE	ACV/OEM
COLLISION	100/OEM
PROPERTY DAMAGE	10000
BODILY INJURY	15/30
PERSONAL INJURY PROTECTION	FULL
LOSS OF USE	25/800

POLICY COVERAGE	
UNINSURED MOTORIST--BODILY INJURY	15/30
UNINSURED MOTORIST--PROPERTY DAMAGE	10000

THIRD PARTY: [REDACTED]

*Sarah Hoban*

HOBAN INSURANCE AGENCY  
18 HICKORY STREET  
P O BOX 70  
FRANKFORD, DE 19945  
PHONE (302) 732-9505

5774

*11/11/05*  
DATE

[REDACTED]

**AUTO POLICY CHANGE REQUEST**POLICY NUMBER: [REDACTED]  
POLICY HOLDER: [REDACTED]DATE PREPARED: [REDACTED]  
CHANGE EFF DATE: [REDACTED]  
POLICY EFF DATE: 01/01/04  
POLICY EXP DATE: 11/01/04

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED. PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

**NATIONWIDE MUTUAL INSURANCE COMPANY (23787)**VEHICLE #1  
[REDACTED]

COMPREHENSIVE	ACV
COLLISION	100
PROPERTY DAMAGE	10000
BODILY INJURY	15/30
DEATH BENEFITS	DB
PERSONAL INJURY PROTECTION	FULL
LOSS OF USE	25/800
TOWING AND LABOR	T&L

POLICY COVERAGE	
UNINSURED MOTORIST--BODILY INJURY	15/30
UNINSURED MOTORIST--PROPERTY DAMAGE	10000

THIRD PARTY: [REDACTED]  
[REDACTED]

HOBAN INSURANCE AGENCY  
18 HICKORY STREET  
P O BOX 70  
FRANKFORD, DE 19945  
PHONE (302) 732-9505

5774

DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.  
[REDACTED]  
[REDACTED]

**AUTO POLICY CHANGE REQUEST**POLICY NUMBER: [REDACTED]  
POLICY HOLDER: [REDACTED]DATE PREPARED: [REDACTED]  
CHANGE EFF DATE: [REDACTED]  
POLICY EFF DATE: [REDACTED]  
POLICY EXP DATE: [REDACTED]

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED. PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

**NATIONWIDE MUTUAL INSURANCE COMPANY (23787)**VEHICLE #2  
[REDACTED]

COMPREHENSIVE	ACV/OEM
COLLISION	100/OEM
PROPERTY DAMAGE	10000
BODILY INJURY	15/30
PERSONAL INJURY PROTECTION	FULL
LOSS OF USE	25/800
POLICY COVERAGE	
UNINSURED MOTORIST--BODILY INJURY	15/30
UNINSURED MOTORIST--PROPERTY DAMAGE	10000

THIRD PARTY: [REDACTED]

HOBAN INSURANCE AGENCY  
18 HICKORY STREET  
P O BOX 70  
FRANKFORD, DE 19945  
PHONE (302) 732-9505

5774

DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.  
[REDACTED]

## AUTO POLICY CHANGE REQUEST

POLICY NUMBER: [REDACTED]

POLICY HOLDER: [REDACTED]

DATE PREPARED: [REDACTED]

CHANGE EFF DATE: [REDACTED]

POLICY EFF DATE: [REDACTED]

POLICY EXP DATE: [REDACTED]

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED. PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

## NATIONWIDE MUTUAL INSURANCE COMPANY (23787)

VEHICLE #3  
[REDACTED]

COMPREHENSIVE	ACV
COLLISION	100
PROPERTY DAMAGE	10000
BODILY INJURY	15/30
PERSONAL INJURY PROTECTION	FULL
TOWING AND LABOR	T&L
POLICY COVERAGE	
UNINSURED MOTORIST--BODILY INJURY	15/30
UNINSURED MOTORIST--PROPERTY DAMAGE	10000

THIRD PARTY: [REDACTED]

HOBAN INSURANCE AGENCY  
18 HICKORY STREET  
P O BOX 70  
FRANKFORD, DE 19945  
PHONE (302) 732-9505

5774

DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.  
[REDACTED]



## AUTO POLICY CHANGE REQUEST

POLICY NUMBER: [REDACTED]  
 POLICY HOLDER: [REDACTED]

DATE PREPARED: [REDACTED]  
 CHANGE EFF DATE: [REDACTED]  
 POLICY EFF DATE: [REDACTED]  
 POLICY EXP DATE: [REDACTED]

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED, PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

## NATIONWIDE MUTUAL INSURANCE COMPANY (23787)

VEHICLE #4

COMPREHENSIVE	ACV
COLLISION	100
PROPERTY DAMAGE	10000
BODILY INJURY	15/30
DEATH BENEFITS	DB
PERSONAL INJURY PROTECTION	FULL
LOSS OF USE	30/900
POLICY COVERAGE	
UNINSURED MOTORIST--BODILY INJURY	15/30
UNINSURED MOTORIST--PROPERTY DAMAGE	10000

THIRD PARTY: [REDACTED]

HOBAN INSURANCE AGENCY  
 18 HICKORY STREET  
 P O BOX 70  
 FRANKFORD, DE 19945  
 PHONE (302) 732-9505

5774

DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.

A11					EFF	TODAY	
EST BILLING FOR TERM		\$235.90	TIER CL TERM S		FROM		TO
VEH1		RERATED					
COMP	100	32.40	100	32.40			
ACC							
COLL	250	87.60	250	168.00			
PD	10000	93.00	10000	93.00			
BI	15/30	112.80	15/30	112.80			
UMBI	15/30	17.40	15/30	17.40			
UMPD	10000	INCL	10000	INCL			
PIP	FULL	103.80	FULL	103.80			
INSD							
APIP							
LOU	LOU	6.00	LOU	6.00			
	TOTAL	453.00	TOTAL	563.40			

POLICY FILING FEES: \$0.00

DRVR/TERR  
 RF/PTS/RS  
 BY: SX: MS: P/O  
 CLG: ADULT: USE  
 DISCOUNTS

/00/23

/00/23

OLD POLICY PREM \$453.00 NEW POLICY PREM \$563.40  
 ENTER N1 FOR RATING AS OF THE NEXT RENEWAL

CHANGE CD

A36 [REDACTED] VEHICLE SCREEN EFF [REDACTED] TODAY [REDACTED]  
 FROM [REDACTED] TO [REDACTED]  
 VEHICLE ACTION REPLACE  
 VT MY MAKE SERIES BODY STYLE VEHICLE ID NUMBER SYMBOL PER PI AMOUNT NEW  
 PE [REDACTED]  
 P [REDACTED]  
 ENG PASSIVE COMMUTE ANNL MLT SUB  
 SIZE DAMAGE RESTRAINT USE MILE/WK MILE CAR CLSS  
 [REDACTED]  
 [REDACTED]  
 RATED BIRTH MART DRVR RES YD GOOD DEF CAR VEH RATE  
 DRIVER DATE SEX STAT TYPE CHLD ADLT STDT SR DRVR POOL TIEP SNR FCTR  
 [REDACTED]  
 [REDACTED]

## COVERAGES

COMP	100	32.40	_____	INSD		CNW
ACC			_____	APIP		
COLL	250	87.60	_____	LOU	LOU	6.00
PD	10000	93.00	_____			
BI	15/30	112.80	_____			
UMBI	15/30	17.40	_____			
UMPD	10000	INCL	_____			
PIP	FULL	103.80	_____			
				TOTAL	453.00	

AW82 LIEN/GARAGING (LG)? FIN RESP (FR)?

CHANGE CD

**AUTO POLICY CHANGE REQUEST**

POLICY NUMBER: [REDACTED]

POLICY HOLDER: [REDACTED]

DATE PREPARED: [REDACTED]  
CHANGE EFF DATE: [REDACTED]  
POLICY EFF DATE: [REDACTED]  
POLICY EXP DATE: [REDACTED]

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED, PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

**NATIONWIDE ASSURANCE COMPANY (10723)****VEHICLE #1**  
[REDACTED]

COMPREHENSIVE	100
COLLISION	250
PROPERTY DAMAGE	10000
BODILY INJURY	15/30
UNINSURED MOTORIST--BODILY INJURY	15/30
UNINSURED MOTORIST--PROPERTY DAMAGE	10000
PERSONAL INJURY PROTECTION	FULL
LOSS OF USE	LOU

THIRD PARTY: [REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

HOBAN INSURANCE AGENCY  
18 HICKORY STREET  
P O BOX 70  
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PHONE (302) 732-9505

5774

DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.

[REDACTED]  
[REDACTED]  
[REDACTED]

POLICY NUMBER [REDACTED]

COVERAGES

VEH 1

COMPREHENSIVE	100 \$48.00
COLLISION	250 \$114.00
BODILY INJURY	15/30 \$138.00
PROPERTY DAMAGE	10000 \$96.00
PERSONAL INJURY PROTECTION	FULL \$126.00
UNINSURED MOTORIST-BI	15/30 \$18.00
UNINSURED MOTORIST-PD	10000 INCLUDED
LOSS OF USE	LOU \$6.00

TOTAL PREMIUM: \$546.00

TERM PREMIUM: \$546.00  
PAY PLAN: I

INSTALLMENT PREMIUM: \$182.40  
AMOUNT COLLECTED: \$182.40

POLICY NUMBER [REDACTED]

COVERAGES

VEH 1

COMPREHENSIVE	ACV	\$64.60
COLLISION	250	\$151.60
BODILY INJURY	15/30	\$83.20
PROPERTY DAMAGE	10000	\$51.20
DEATH BENEFITS	DB	\$ .60
PERSONAL INJURY PROTECTION	FULL	\$29.60
LOSS OF USE	BROAD	\$12.00
TOWING & LABOR		\$1.50
TOTAL PREMIUM:		<u>\$394.30</u>

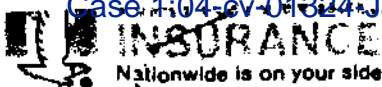
\*\*\*\*\*

POLICY COVERAGE		
UNINSURED MOTORIST-BODILY INJURY	15/30	\$19.10
UNINSURED MOTORIST-PROPERTY DAMAGE	10,000	INCLUDED

\*\*\*\*\*

TERM PREMIUM: \$413.40  
 PAY PLAN: S

INSTALLMENT PREMIUM: \$209.70  
 AMOUNT COLLECTED: \_\_\_\_\_



HOME OFFICE ONE NATIONWIDE PLAZA - COLUMBUS, OHIO 43215

A11 REVIEW 2 OF 2 ~~XXXXXXXXXX~~ ~~XXXXXXXXXX~~ ~~XXXXXXXXXX~~ CHANGE EFF DATE ~~03/17/2006~~  
 NEXT RENEWAL ~~XXXXXXXXXX~~ ESTIMATED BILLING FOR TERM \$68.40 TIER 01 TERM ~~XXXXXXXXXX~~

	VEH 3 <del>XXXXXXXXXX</del>		VEH 3 <del>XXXXXXXXXX</del>
COMP ACV	25.40	ACV	25.40
COLL 100	79.80	100	79.80
BI 15/30	57.20	15/30	57.20
PD 10000	30.40	10000	30.40
MP			
UMBI 15/30	0.00	15/30	0.00
UMPD 10000	INCL	10000	INCL
PIP FULL	30.00	FULL	30.00
INSD			
APIP			
ADDL			
PE			

TOTAL	222.80	222.80
R FCTR/PTS	.75/00	.75/00
MS:P/O: SX:BY	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>
CLG:ADLT:USE	N: :P	N: :P
DISC MC,AM	<del>XXXXXXXXXX</del>	

OLD POLICY PREM \$779.30 NEW POLICY PREM \$976.80  
 ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

CHANGE CD



HOME OFFICE: ONE NATIONWIDE PLAZA • COLUMBUS, OHIO 43215

11 REVIEW 1 OF 2

EXT RENEWAL TO

ESTIMATED BILLING FOR TERM

CHANGE EFF DATE

\$48.00 TIER 01

TERM

	VEH 1		VEH 1		VEH 2		VEH 2
OMP					100	32.60	100 32.60
OLL					100	95.60	100 95.60
I 15/30	121.80	15/30	121.80	15/30	74.70	15/30	74.70
D 10000	64.60	10000	64.60	10000	39.60	10000	39.60
P							
MBI 15/30	35.20	15/30	35.20	15/30	0.00	15/30	0.00
MPD 10000	INCL	10000	INCL	10000	INCL	10000	INCL
IP FULL	63.90	FULL	63.90	FULL	39.10	FULL	39.10
NSD							
PIP							
DDL					TL	1.50	TL 1.50
E							

TOTAL	285.50	285.50	283.10	283.10
FCR/PTS	1.55/00	1.55/00	.95/00	.95/00

IS:P/O: SX:BY

LG:ADLT:USE

DISC GS,MC

OLD POLICY PREM \$705.80 NEW POLICY PREM \$795.00

ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

MC

CHANGE R2



Nationwide is on your side

HOME OFFICE: ONE NATIONWIDE PLAZA - COLUMBUS, OHIO 43216

11 REVIEW 1 OF 2

EXT RENEWAL

ESTIMATED BILLING FOR TERM

CHANGE EFF DATE

\$48.00 TIER 01

TERM S

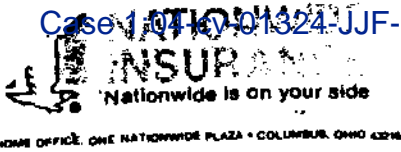
	VEH 1		VEH 1		VEH 2		VEH 2
COMP					100	32.60	100 32.60
ROLL					100	95.60	100 95.60
MI 15/30	121.80	15/30	121.80	15/30	74.70	15/30	74.70
PD 10000	64.60	10000	64.60	10000	39.60	10000	39.60
IP							
IMBI 15/30	35.20	15/30	35.20	15/30	0.00	15/30	0.00
IMPD 10000	INCL	10000	INCL	10000	INCL	10000	INCL
PIP FULL	63.90	FULL	63.90	FULL	39.10	FULL	39.10
INSD							
APIP							
ADDL					TL	1.50	TL 1.50
PE							

TOTAL	285.50	285.50	283.10	283.10
R FCTR/PTS	1.55/00	1.55/00	.95/00	.95/00
MS:P/O: SX:BY				
CLG:ADLT:USE				
DISC GS,MC				
OLD POLICY PREM	\$705.80	NEW POLICY PREM	\$795.00	
ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING				CHANGE R2

HOME OFFICE: ONE NATIONWIDE PLAZA - COLUMBUS, OHIO 43216

All REVIEW 1 OF 2  
 NEXT RENEWAL ESTIMATED BILLING FOR TERM CHANGE EFF DATE  
 \$48.00 TIER 01 TERM S

	VEH 1	VEH 1	VEH 2	VEH 2
COMP			100	100
COLL			100	100
BI 15/30	121.80	15/30 121.80	15/30 74.70	15/30 74.70
PD 10000	64.60	10000 64.60	10000 39.60	10000 39.60
MP				
UMBI 15/30	35.20	15/30 35.20	15/30 0.00	15/30 0.00
UMPD 10000	INCL	10000 INCL	10000 INCL	10000 INCL
PIP FULL	63.90	FULL 63.90	FULL 39.10	FULL 39.10
INSD				
APIP				
ADDL			TL 1.50	TL 1.50
PE				
TOTAL	285.50	285.50	283.10	283.10
R FCTR/PTS	1.55/00	1.55/00	.95/00	.95/00
MS:P/O:SX:BY				
CLG:ADLT:USE				
DISC GS,MC				
OLD POLICY PREM	\$705.80	NEW POLICY PREM	\$795.00	
ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING				CHANGE R2



11 REVIEW 2 OF 2

EXT RENEWAL ESTIMATED BILLING FOR TERM

CHANGE EFF DATE

\$48.00 TIER 01 TERM

\*\* RERATED \*\*

VEH 3

VEH 3

OMP		ACV	25.40
OLL		100	79.80
I	15/30	66.80	15/30
D	10000	35.40	10000
IP			
MBI	15/30	0.00	15/30
MPD	10000	INCL	10000
PIP	FULL	35.00	FULL
INSD			
APIP			
ADDL			
PE			

TOTAL 137.20 226.40

R FCTR/PTS .85/00 .75/00

MS:P/O: SX:BY

CLG:ADLT:USE

DISC MC,AM

OLD POLICY PREM \$705.80 NEW POLICY PREM \$795.00

ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

CHANGE CD



HOME OFFICE: ONE NATIONWIDE PLAZA • COLUMBUS, OHIO 43216

A36

## VEHICLE DATA

EFF DATE

CHANGE EFF DATE

VEHICLE 3 ACTION REPLACE

PDT MY MAKE SERIES VEHICLE ID NUMBER

RATE SYMBOL HP DMG

PR

01

01

BODY STYLE 00 00 ALT/CUST(Y/N) N ADDL RS 00

CLASSIFICATION

USE SEX MS BM BD BY P/O RC MC GS CP DD SR SC RF STD AMT

P

COMMUTE MILES/WEEK 080 000

ANNL MILES 04

## COVERAGES

COMP

ACV

PIP

FULL

35.00

COLL

100

INSD

BI 15/30

66.80

APIP

PD 10000

35.40

LOU

MP

CB ETC

UMBI 15/30

0.00

T&amp;L

UMPD 10000

INCL

PE

TOTAL

137.20

W07 IS LIEN REQUIRED?

CHANGE CD

**INSURANCE**  
Nationwide is on your side

HOME OFFICE: ONE NATIONWIDE PLAZA - COLUMBUS, OHIO 43216

ALL REVIEW 2 OF 2

NEXT RENEWAL ESTIMATED BILLING FOR TERM

CHANGE EFF DATE

\$319.60 TIER 01 TERM S

\*\* RERATED \*\*

VEH 3

VEH 3

COMP ACV	18.10	CNW	
COLL 100	60.50	CNW	
BI 15/30	66.80	15/30	66.80
PD 10000	35.40	10000	35.40
MP			
UMBI 15/30	0.00	15/30	0.00
UMPD 10000	INCL	10000	INCL
PIP FULL	35.00	FULL	35.00
INSD			
APIP			
ADDL			
PE			

TOTAL 215.80 137.20

R FCTR/PTS .85/00 .85/00

MS:P/O: SX:BY

CLG:ADLT:USE

DISC MC,AM

OLD POLICY PREM \$784.40 NEW POLICY PREM \$705.80

ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

CHANGE CD

A11		[REDACTED]		[REDACTED]		EFF [REDACTED] TODAY [REDACTED]	
UNABLE TO RATE -	MANUAL RATE	TIER 01	TERM S	FROM	TO	RERATED	[REDACTED]
VEH1	[REDACTED]	VEH2	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
COMP	250	16.70	250	16.70	250	28.30	28.30
COLL					500	58.20	58.20
PD	10000	43.50	10000	43.50	10000	43.50	43.50
BI	15/30	61.20	15/30	61.20	15/30	61.20	61.20
DB	DB	.70	DB	.70	DB	.50	.50
PIP	FULL	67.90	FULL	67.90	FULL	40.70	40.70
INSD							
APIP							
LOU							
T&L	T&L	1.50	T&L	1.50	T&L	1.50	1.50
CB							
PE							
UMBI	15/30	40.10					
UMPD	10000	INCL					
TOTAL	191.50	TOTAL	191.50	TOTAL	233.90	TOTAL	233.90
DRVR/TERR	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
RF/PTS/RS	.77/00/12	.77/00/12	.77/00/23	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
BY: SX: MS: P/O	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
CLG: ADULT: USE	:N:P	:N:P	:N:P	:N:P	:N:P	:N:P	:N:P
DISCOUNTS	HC, LT, MC, AM	HC, LT, MC, AM	HC, LT, MC, AM, PR	HC, LT, MC, AM, PR	HC, LT, MC, AM, PR	HC, LT, MC, AM, PR	HC, LT, MC, AM, PR

OLD POLICY PREM \$465.50 CURRENT PREM NOT AVAILABLE  
 ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

INQUIRE R2

138

A11 [REDACTED] [REDACTED] EFF [REDACTED] TODAY [REDACTED]  
 UNABLE TO RATE - MANUAL RATE TIER 01 TERM S FROM [REDACTED] TO [REDACTED]  
 VEH3 RERATED [REDACTED]

COMP 250  
 COLL  
 PD 10000  
 BI 15/30  
 DB DB  
 PIP FULL

INSD  
 APIP  
 LOU  
 T&L T&L  
 CB  
 PE

UMBI 15/30 40.10 - POLICY COVERAGE  
 UMPD 10000 INCL - POLICY COVERAGE

DRVR/TERR [REDACTED]  
 RF/PTS/RS [REDACTED]  
 BY: SX: MS: P/O [REDACTED]  
 CLG: ADULT: USE :N: W010  
 DISCOUNTS HC, LT, MC, PR

OLD POLICY PREM \$465.50 CURRENT PREM NOT AVAILABLE  
 ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

INQUIRE CD

A06 [REDACTED] VEHICLE SCREEN EFF [REDACTED] TODAY [REDACTED]  
 FROM [REDACTED] TO [REDACTED]  
 RATE [REDACTED] ADDTL COST [REDACTED]  
 VEHICLE 3 ACTION ADD SYMBOL ALT PI AMOUNT NEW  
 VT MY MAKE SERIES BODY STYLE VEHICLE ID NUMBER  
 PP [REDACTED] 13 10 N  
 ENG S/ PASSIVE COMMUTE ANNL REG MLT SUB  
 SIZE DAMAGE RT RESTRAINT USE MILE/WK MILE OWN CAR CLSS  
 N NONE N AD AIR BAG D W 010 10 1  
 RATED BIRTH MART DRVR RES YD GOOD DEF CAR VEH RATE  
 DRIVER DATE SEX STAT TYPE CHLD ADLT STDT DRVR POOL TIER SNR FCTR  
 1 [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] 1  
 COVERAGES  
 COMP 250 INSD CNW  
 COLL APIP  
 PD 10000 LOU  
 BI 15/30 T&L  
 DB CB  
 UMBI 15/30 PE  
 UMPD 10000  
 PIP FULL

INQUIRE CD (CH TO CHANGE)



## VIOLATIONS, ACCIDENT HISTORY

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2		
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
<b>Vehicle Level Coverages</b>				
Comprehensive	250	\$17.60	250	\$29.80
Collision	CNW		500	\$81.30
Property Damage	10000	\$45.80	10000	\$45.80
Bodily Injury	15/30	\$64.40	15/30	\$64.40
Death Benefits	DB	\$0.70	DB	\$0.50
Personal Injury Protection	FULL	\$71.50	FULL	\$42.80
Deductible Applies To	CNW		CNW	
Addl. Pers. Inj. Protection	CNW		CNW	
Loss of Use	CNW		CNW	
Towing & Labor	T&L	\$1.50	T&L	\$1.50
CB Coverage	CNW		CNW	
Personal Effects				
Total Vehicle Premium		\$201.50		\$248.10
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI		15/30		\$40.10
Uninsured Motorists - PD		10000		INCLUDED
Policy Level Premium				\$40.10
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Long Term				
Multi Car				
Annual Mileage				
Passive Restraint				
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	50	\$164.80		
Collision	250	\$329.50		
Property Damage	25000	\$146.90		
Bodily Injury	100/300	\$340.00		
Death Benefits	DB	\$1.90		
Personal Injury Protection	FULL	\$193.00		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	CNW			
Towing & Labor (Auto)	CNW			
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$1176.10		
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI	100/300	\$50.60		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$50.60		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Passive Restraint				
VEHICLE AND POLICY LEVEL SURCHARGES				

AUTO BINDER RECEIPT

POLICY NUMBER

POLICY EFF. DATE

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) FOR A PERIOD OF 30 DAYS FROM THE EFFECTIVE DATE INDICATED, PENDING THE ISSUANCE OF AN AUTOMOBILE INSURANCE POLICY. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE EFFECTIVE DATE OF THIS AGREEMENT. THIS AGREEMENT MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE APPLICANT STATING WHEN IN ACCORDANCE WITH ANY APPLICABLE STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

NATIONWIDE MUTUAL INSURANCE COMPANY

VEH #1

COMPREHENSIVE	50	\$164.80
COLLISION	250	\$329.50
BODILY INJURY	100/300	\$340.00
PROPERTY DAMAGE	25000	\$146.90
DEATH BENEFITS	DB	\$1.90
PERSONAL INJURY PROTECTION	FULL	\$193.00

TOTAL VEHICLE PREMIUM \$1176.10

\*\*\*\*\*

POLICY COVERAGE		
UNINSURED MOTORIST--BODILY INJURY	100/300	\$50.60
UNINSURED MOTORIST--PROPERTY DAMAGE	10,000	INCLUDED

\*\*\*\*\*

SEMI-ANNUAL PREMIUM \$1,226.70

Lien:

THIS ACKNOWLEDGES RECEIPT OF \$0.00

*Hoban Insurance Agency*  
 HOBAN INSURANCE AGENCY  
 18 HICKORY STREET  
 P O BOX 70  
 FRANKFORD, DE 19945  
 PHONE (302) 732-9505

5774

DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY

ALL REVIEW 1 OF 1 [REDACTED] 52E119260 CHANGE EFF DATE [REDACTED]  
 NEXT RENEWAL 02/09/05 ESTIMATED BILLING FOR TERM \$.00 CO 01 TERM S

\*\* RERATED \*\*

	VEH 1 [REDACTED]		VEH 1 [REDACTED] T	
COMP	50	115.00	50	115.00
COLL	250	231.20	250	231.20
PD	25000	102.80	25000	102.80
BI	100/300	238.50	100/300	238.50
DB	DB	1.30	DB	1.30
PIP	FULL	133.90	FULL	133.90
INSD				
APIP				
ADDL				
PE				
TOTAL		822.70		822.70
UMBI	100/300	50.60	100/300	50.60 -POLICY COVERAGE
UMPD	10000	INCL	10000	INCL -POLICY COVERAGE
FILE FEE/FB/AG				
POL DISC	[REDACTED]		[REDACTED]	
CHARGES				
RATED DRV	[REDACTED]		[REDACTED]	
#A:#MA:#MI	00:00:00		00:00:00	

OLD POLICY PREM \$873.30 NEW POLICY PREM \$873.30  
 ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

CHANGE CD

## AUTO POLICY CHANGE REQUEST

POLICY NUMBER: [REDACTED]  
 POLICY HOLDER: [REDACTED]

DATE PREPARED: [REDACTED]  
 CHANGE EFF DATE: [REDACTED]  
 POLICY EFF DATE: [REDACTED]  
 POLICY EXP DATE: [REDACTED]

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED. PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

## NATIONWIDE MUTUAL INSURANCE COMPANY (23787)

VEHICLE #1

COMPREHENSIVE	50
COLLISION	250
PROPERTY DAMAGE	25000
BODILY INJURY	100/300
DEATH BENEFITS	DB
PERSONAL INJURY PROTECTION	FULL
POLICY COVERAGE	
UNINSURED MOTORIST--BODILY INJURY	100/300
UNINSURED MOTORIST--PROPERTY DAMAGE	10000

THIRD PARTY: LIENHOLDER

[REDACTED]  
 [REDACTED]  
 [REDACTED]  
 [REDACTED]

*Maria Casanova*

HOBAN INSURANCE AGENCY  
 18 HICKORY STREET  
 P O BOX 70  
 FRANKFORD, DE 19945  
 PHONE (302) 732-9505

5774

8/13/04  
 DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.

[REDACTED]  
 [REDACTED]  
 [REDACTED]

A11 REVIEW 1 OF 1 XXXXXXXXXX 52E119260 CHANGE EFF DATE XXXXXXXXXX  
 NEXT RENEWAL 02/09/05 ESTIMATED BILLING FOR TERM \$ .00 CO 01 TERM S

\*\* RERATED \*\*

VEH 1 <span style="background-color: black; color: black;">XXXXXXXXXX</span>		VEH 1 <span style="background-color: black; color: black;">XXXXXXXXXX</span>		
COMP	50	115.00	50	115.00
COLL	250	231.20	250	231.20
PD	25000	102.80	25000	102.80
BI	100/300	238.50	100/300	238.50
DB	DB	1.30	DB	1.30
PIP	FULL	133.90	FULL	133.90
INSD				
APIP				
ADDL				
PE				
TOTAL		822.70		822.70
UMBI	100/300	50.60	100/300	50.60 -POLICY COVERAGE
UMPD	10000	INCL	10000	INCL -POLICY COVERAGE
FILE FEE/FB/AG				
POL DISC LT,MC,PR,A5 LT,MC,A5,PR				
CHARGES				
RATED DRV <span style="background-color: black; color: black;">XXXXXXXXXX</span> <span style="background-color: black; color: black;">XXXXXXXXXX</span>				
#A:#MA:#MI		00:00:00		00:00:00

OLD POLICY PREM \$873.30 NEW POLICY PREM \$873.30  
 ENTER DS FOR DISCOUNT SAVINGS SCREEN, N1 FOR RENEWAL RATING

CHANGE CD

## AUTO POLICY CHANGE REQUEST

POLICY NUMBER: [REDACTED]

POLICY HOLDER: [REDACTED]

DATE PREPARED: [REDACTED]

CHANGE EFF DATE: [REDACTED]

POLICY EFF DATE: [REDACTED]

POLICY EXP DATE: [REDACTED]

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED, PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

## NATIONWIDE MUTUAL INSURANCE COMPANY (23787)

VEHICLE #1  
[REDACTED]  
[REDACTED]

COMPREHENSIVE	50
COLLISION	250
PROPERTY DAMAGE	25000
BODILY INJURY	100/300
DEATH BENEFITS	DB
PERSONAL INJURY PROTECTION	FULL
POLICY COVERAGE	
UNINSURED MOTORIST--BODILY INJURY	100/300
UNINSURED MOTORIST--PROPERTY DAMAGE	10000

THIRD PARTY: [REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]


HOBAN INSURANCE AGENCY

5774

18 HICKORY STREET

P O BOX 70

FRANKFORD, DE 19945

PHONE (302) 732-9505

8/13/04

DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.

[REDACTED]  
[REDACTED]  
[REDACTED]

A03 AUTO RATE QUOTE #1 - COVERAGES EFF DATE [REDACTED]  
 NAME: [REDACTED] ST DE AGT ID A CO 01

	99 PONT TERR 012	
COMP	50	164.80
COLL	250	329.50
PD	25000	146.90
BI	100/300	340.00
DB	DB	1.90
UMBI	100/300	50.60
UMPD	10000	INCL
PIP	FULL	193.00
INSD		
APIP	CNW	
ADDL	CNW	
PE		
TOTAL		1226.70

FILE FEE/FB/AG  
 POL DISC A5, PR  
 CHARGES  
 RATED DRV [REDACTED]  
 #A:#MA:#MI 00:00:00  
 #C 00  
 CURRENT TOTL/INST \$1226.70 / \$617.35  
 <PREV PG> CLASS <NEXT PG> QUOTE #2 <TAB> CHANGE <GO> TO SELECT QUOTE #1

$$\begin{array}{r}
 204.45 + 4 = 208.45 \\
 + 194.93 \\
 \hline
 403.38
 \end{array}$$



## AUTO POLICY CHANGE REQUEST

POLICY NUMBER: [REDACTED]  
 POLICY HOLDER: [REDACTED]

DATE PREPARED: [REDACTED]  
 CHANGE EFF DATE: [REDACTED]  
 POLICY EFF DATE: [REDACTED]  
 POLICY EXP DATE: [REDACTED]

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED. PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE

## NATIONWIDE MUTUAL INSURANCE COMPANY (23787)

VEHICLE #1

COMPREHENSIVE	50
COLLISION	250
PROPERTY DAMAGE	25000
BODILY INJURY	100/300
DEATH BENEFITS	DS
PERSONAL INJURY PROTECTION	FULL
POLICY COVERAGE	
UNINSURED MOTORIST--BODILY INJURY	100/300
UNINSURED MOTORIST--PROPERTY DAMAGE	10000

THIRD PARTY: LIENHOLDER

[REDACTED]  
 [REDACTED]  
 [REDACTED]  
 [REDACTED]

HOBAN INSURANCE AGENCY  
 18 HICKORY STREET  
 P O BOX 70  
 FRANKFORD, DE 19945  
 PHONE (302) 732-9505

5774

DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.

[REDACTED]  
 [REDACTED]  
 [REDACTED]

VIOLATIONS, ACCIDENT HISTORY  
[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type				
Rate Symbol	[REDACTED]			
Existing Damage				
Description	[REDACTED]			
Cause				
Salvaged/Rebuilt Title				
Reason	[REDACTED]			
Customized				
Description	[REDACTED]			
Amount				
Symbol				
Stated Amount				
Inspection				
Vehicle Level Coverages				
Comprehensive	50	\$119.60		
Collision	250	\$253.30		
Property Damage	25000	\$102.60		
Bodily Injury	100/300	\$243.20		
Death Benefits	DB	\$0.90		
Personal Injury Protection	FULL	\$93.20		
Deductible Applies To	CNW			
Addl. Pers. Inj. Protection	CNW			
Loss of Use	CNW			
Towing & Labor				
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$812.80		
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI	100/300	\$47.20		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$47.20		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Home And Car	[REDACTED]			
Long Term	[REDACTED]			
Multi Car	[REDACTED]			
Passive Restraint	[REDACTED]			
VEHICLE AND POLICY LEVEL SURCHARGES				
[REDACTED]				

VIOLATIONS, ACCIDENT HISTORY  
[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type	[REDACTED]			
Rate Symbol	[REDACTED]			
Existing Damage	[REDACTED]			
Description	[REDACTED]			
Cause	[REDACTED]			
Salvaged/Rebuilt Title	[REDACTED]			
Reason	[REDACTED]			
Customized	[REDACTED]			
Description	[REDACTED]			
Amount	[REDACTED]			
Symbol	[REDACTED]			
Stated Amount	[REDACTED]			
Inspection	[REDACTED]			
Customary Operator	[REDACTED]			
Vehicle Use	[REDACTED]			
<b>Vehicle Level Coverages</b>				
Comprehensive	CNW			
Collision	CNW			
Property Damage	10000	\$88.30		
Bodily Injury	15/30	\$138.50		
Death Benefits	DB	\$0.80		
Personal Injury Protection	FULL	\$88.90		
Deductible Applies To				
Add. Pers. Inj. Protection	CNW			
Loss of Use	CNW			
Towing & Labor (Auto)	CNW			
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$318.50		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	15/30		\$23.90	
Uninsured Motorists - PD	10000		INCLUDED	
Policy Level Premium			\$23.90	
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Passive Restraint	[REDACTED]			
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				
[REDACTED]				

## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2	Vehicle 3
Model Year			
Make			
Model			
Vehicle Identification Number			
Registered Owner(s)			
Product Type			
Sub Product Type			
Rate Symbol			
Existing Damage			
Description			
Cause			
Salvaged/Rebuilt Title			
Reason			
Customized			
Description			
Amount			
Symbol			
Stated Amount			
Inspection			
Customary Operator			
Vehicle Use			
Vehicle Level Coverages			
Comprehensive	100 \$81.00	CNW	100 \$38.50
Collision	250 \$128.00	CNW	250 \$101.00
Property Damage	50000 \$50.70	50000 \$50.70	50000 \$50.70
Bodily Injury	100/300 \$106.50	100/300 \$106.50	100/300 \$110.20
Death Benefits	DB \$0.20	DB \$0.40	DB \$0.20
Personal Injury Protection	FULL \$37.80	FULL \$54.20	FULL \$38.90
Deductible Applies To			
Addl. Pers. Inj. Protection	CNW	CNW	CNW
Loss of Use	CNW	CNW	CNW
Towing & Labor (Auto)	CNW	CNW	CNW
CB Coverage	CNW	CNW	CNW
Personal Effects			
Total Vehicle Premium	\$384.00	\$211.80	\$340.50
POLICY LEVEL COVERAGES			
Uninsured Motorists - BI		100/300	\$89.30
Uninsured Motorists - PD		10000	INCLUDED
Policy Level Premium			\$89.30
VEHICLE AND POLICY LEVEL DISCOUNTS			
Multi Car			
Passive Restraint			
VEHICLE AND POLICY LEVEL SURCHARGES			

## VIOLATIONS, ACCIDENT HISTORY

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2	Vehicle 3
Model Year			
Make			
Model			
Vehicle Identification Number			
Registered Owner(s)			
Product Type			
Sub Product Type			
Rate Symbol			
Existing Damage			
Description			
Cause			
Salvaged/Rebuilt Title			
Reason			
Customized			
Description			
Amount			
Symbol			
Stated Amount			
Inspection			
Customary Operator			
Vehicle Use			
Vehicle Level Coverages			
Comprehensive	500 \$24.80	CNW	CNW
Collision	500 \$86.00	CNW	CNW
Property Damage	25000 \$45.50	25000 \$47.60	25000 \$62.50
Bodily Injury	50/100 \$100.00	50/100 \$97.90	50/100 \$111.40
Death Benefits	DB \$0.30	DB \$0.30	DB \$0.30
Personal Injury Protection	FULL \$45.30	FULL \$36.80	FULL \$47.00
Deductible Applies To			
Addl. Pers. Inj. Protection	CNW	CNW	CNW
Loss of Use	CNW	CNW	CNW
Towing & Labor (Auto)	CNW	CNW	CNW
CB Coverage	CNW	CNW	CNW
Personal Effects			
Total Vehicle Premium	\$302.00	\$182.60	\$211.20
POLICY LEVEL COVERAGES			
Uninsured Motorists - BI		50/100	\$67.00
Uninsured Motorists - PD		10000	INCLUDED
Policy Level Premium			\$67.00
VEHICLE AND POLICY LEVEL DISCOUNTS			
Multi Line			
Multi Car			
Passive Restraint			
VEHICLE AND POLICY LEVEL SURCHARGES			

VIOLATIONS, ACCIDENT HISTORY  
[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type	[REDACTED]			
Rate Symbol	[REDACTED]			
Existing Damage	[REDACTED]			
Description	[REDACTED]			
Cause	[REDACTED]			
Salvaged/Rebuilt Title	[REDACTED]			
Reason	[REDACTED]			
Customized	[REDACTED]			
Description	[REDACTED]			
Amount	[REDACTED]			
Symbol	[REDACTED]			
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use	[REDACTED]			
Vehicle Level Coverages				
Comprehensive	100	\$52.70		
Collision	250	\$104.10		
Property Damage	100000	\$76.80		
Bodily Injury	100/300	\$161.00		
Death Benefits	DB	\$0.60		
Personal Injury Protection	FULL	\$69.50		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	CNW			
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$486.10		
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI	100/300	\$47.80		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$47.80		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Passive Restraint	[REDACTED]			
VEHICLE AND POLICY LEVEL SURCHARGES				
[REDACTED]				

VIOLATIONS, ACCIDENT HISTORY  
[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type	[REDACTED]			
Rate Symbol	[REDACTED]			
Existing Damage				
Description	[REDACTED]			
Cause	[REDACTED]			
Salvaged/Rebuilt Title				
Reason	[REDACTED]			
Customized				
Description	[REDACTED]			
Amount	[REDACTED]			
Symbol				
Stated Amount				
Inspection				
Customary Operator	[REDACTED]			
Vehicle Use	[REDACTED]			
Vehicle Level Coverages				
Comprehensive	CNW			
Collision	CNW			
Property Damage	25000	\$268.70		
Bodily Injury	25/50	\$412.80		
Death Benefits	DB	\$2.30		
Personal Injury Protection	FULL	\$248.70		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	CNW			
Towing & Labor (Auto)	CNW			
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$928.50		
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI	25/50	\$27.80		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$27.80		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Long Term	[REDACTED]			
Affinity Group	[REDACTED]			
VEHICLE AND POLICY LEVEL SURCHARGES				
[REDACTED]				

## VIOLATIONS, ACCIDENT HISTORY

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1		Vehicle 2	
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	250	\$26.10	250	\$29.50
Collision	250	\$88.00	250	\$117.20
Property Damage	50000	\$43.30	50000	\$44.80
Bodily Injury	100/300	\$97.40	100/300	\$100.50
Death Benefits	DB	\$0.20	DB	\$0.40
Personal Injury Protection	FULL	\$39.50	FULL	\$46.80
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW		CNW	
Loss of Use	50/1300	\$30.10	50/1300	\$30.10
Towing & Labor (Auto)	T&L	\$1.30	T&L	\$1.30
CB Coverage	CNW		CNW	
Personal Effects				
Total Vehicle Premium		\$326.90		\$370.40
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI		100/300		\$81.30
Uninsured Motorists - PD		10000		INCLUDED
Policy Level Premium				\$81.30
VEHICLE AND POLICY LEVEL DISCOUNTS				
Homeowner				
Affinity Group				
Multi Car				
Passive Restraint				
VEHICLE AND POLICY LEVEL SURCHARGES				

Policy Number: [REDACTED]



## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code
[REDACTED]	[REDACTED]		[REDACTED]	[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2		
Model Year	[REDACTED]	[REDACTED]		
Make	[REDACTED]	[REDACTED]		
Model	[REDACTED]	[REDACTED]		
Vehicle Identification Number	[REDACTED]	[REDACTED]		
Registered Owner(s)	[REDACTED]	[REDACTED]		
Product Type	[REDACTED]	[REDACTED]		
Sub Product Type	[REDACTED]	[REDACTED]		
Rate Symbol	[REDACTED]	[REDACTED]		
Existing Damage				
Description	[REDACTED]	[REDACTED]		
Cause	[REDACTED]	[REDACTED]		
Salvaged/Rebuilt Title				
Reason	[REDACTED]	[REDACTED]		
Customized				
Description	[REDACTED]	[REDACTED]		
Amount	[REDACTED]	[REDACTED]		
Symbol	[REDACTED]	[REDACTED]		
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use	[REDACTED]	[REDACTED]		

## Vehicle Level Coverages

Comprehensive	CNW		CNW	
Collision	CNW		CNW	
Property Damage	25000	\$44.40	25000	\$52.80
Bodily Injury	50/100	\$97.60	50/100	\$115.90
Death Benefits	DB	\$0.30	DB	\$0.30
Personal Injury Protection	FULL	\$38.90	FULL	\$47.90
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW		CNW	
Loss of Use	CNW		CNW	
Towing & Labor (Auto)	CNW		CNW	
CB Coverage	CNW		CNW	
Personal Effects				
Total Vehicle Premium		\$181.20		\$216.90

## POLICY LEVEL COVERAGES

Uninsured Motorists - BI	50/100	\$67.00
Uninsured Motorists - PD	10000	INCLUDED
Policy Level Premium		\$67.00

## VEHICLE AND POLICY LEVEL DISCOUNTS

Multi Line	[REDACTED]		
Multi Car	[REDACTED]		
Passive Restraint	[REDACTED]		

## VEHICLE AND POLICY LEVEL SURCHARGES

## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2		
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	CNW	CNW		
Collision	CNW	CNW		
Property Damage	25000	\$98.50	25000	\$73.80
Bodily Injury	25/50	\$152.90	25/50	\$126.30
Death Benefits	DB	\$0.90	DB	\$0.80
Personal Injury Protection	FULL	\$98.40	FULL	\$92.00
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW	CNW		
Loss of Use	CNW	CNW		
Towing & Labor (Auto)	CNW	CNW		
CB Coverage	CNW	CNW		
Personal Effects				
Total Vehicle Premium		\$350.70		\$292.90
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI		25/50		\$57.00
Uninsured Motorists - PD		10000		INCLUDED
Policy Level Premium				\$57.00
VEHICLE AND POLICY LEVEL DISCOUNTS				
Multi Car				
VEHICLE AND POLICY LEVEL SURCHARGES				

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
<b>Vehicle Level Coverages</b>				
Comprehensive	100	\$36.70		
Collision	500	\$99.80		
Property Damage	50000	\$52.30		
Bodily Injury	100/300	\$116.80		
Death Benefits	DB	\$0.40		
Personal Injury Protection	FULL	\$48.60		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	25/800	\$16.60		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$372.60		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	100/300	\$50.60		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$50.60		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Multi Line				
Passive Restraint				
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

# VIOLATIONS, ACCIDENT HISTORY

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2		
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	100	\$45.40	100	\$69.70
Collision	500	\$69.90	500	\$225.60
Property Damage	50000	\$40.70	50000	\$101.10
Bodily Injury	100/300	\$88.90	100/300	\$226.70
Death Benefits	DB	\$0.20	DB	\$0.70
Personal Injury Protection	FULL	\$32.30	FULL	\$83.10
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW		CNW	
Loss of Use	CNW		CNW	
Towing & Labor (Auto)	T&L	\$1.30	T&L	\$1.30
CB Coverage	CNW		CNW	
Personal Effects				
Total Vehicle Premium		\$278.70		\$708.20
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI		100/300		\$81.30
Uninsured Motorists - PD		10000		INCLUDED
Policy Level Premium				\$81.30
VEHICLE AND POLICY LEVEL DISCOUNTS				
Multi Line				
Affinity Group				
Multi Car				
Passive Restraint				
VEHICLE AND POLICY LEVEL SURCHARGES				

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	100	\$46.40		
Collision	250	\$107.80		
Property Damage	50000	\$97.30		
Bodily Injury	100/300	\$215.90		
Death Benefits	DB	\$1.00		
Personal Injury Protection	FULL	\$104.10		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$19.50		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$593.40		
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI	100/300	\$55.70		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$55.70		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Passive Restraint				
VEHICLE AND POLICY LEVEL SURCHARGES				

## VIOLATIONS, ACCIDENT HISTORY

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1		Vehicle 2		
Model Year					
Make					
Model					
Vehicle Identification Number					
Registered Owner(s)					
Product Type					
Sub Product Type					
Rate Symbol					
Existing Damage					
Description					
Cause					
Salvaged/Rebuilt Title					
Reason					
Customized					
Description					
Amount					
Symbol					
Stated Amount					
Inspection					
Customary Operator					
Vehicle Use					
Vehicle Level Coverages					
Comprehensive	250	\$40.30	250	\$45.50	
Collision	500	\$116.40	500	\$162.60	
Property Damage	50000	\$70.60	50000	\$65.40	
Bodily Injury	25/50	\$115.70	25/50	\$115.70	
Death Benefits	DB	\$0.50	DB	\$0.60	
Personal Injury Protection	FULL	\$56.90	FULL	\$71.30	
Deductible Applies To					
Addl. Pers. Inj. Protection	CNW		CNW		
Loss of Use	20/700	\$13.30	20/700	\$13.30	
Towing & Labor (Auto)	T&L	\$1.30	T&L	\$1.30	
CB Coverage	CNW		CNW		
Personal Effects					
Total Vehicle Premium		\$415.00		\$475.70	
POLICY LEVEL COVERAGES					
Uninsured Motorists - BI		25/50		\$44.60	
Uninsured Motorists - PD		10000		INCLUDED	
Policy Level Premium				\$44.60	
VEHICLE AND POLICY LEVEL DISCOUNTS					
Affinity Group					
Multi Car					
Passive Restraint					
VEHICLE AND POLICY LEVEL SURCHARGES					

## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2		
Model Year	98			
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	500	\$32.50	500	\$35.00
Collision	1000	\$95.10	1000	\$81.50
Property Damage	100000	\$61.00	100000	\$61.00
Bodily Injury	300/300	\$150.20	300/300	\$139.60
Death Benefits	DB	\$0.60	DB	\$0.40
Personal Injury Protection	FULL	\$63.80	FULL	\$47.90
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW		CNW	
Loss of Use	CNW		CNW	
Towing & Labor (Auto)	T&L	\$1.40	T&L	\$1.40
CB Coverage	CNW		CNW	
Personal Effects				
Total Vehicle Premium		\$404.60		\$368.80
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI		300/300		\$125.30
Uninsured Motorists - PD		10000		INCLUDED
Policy Level Premium				\$125.30
VEHICLE AND POLICY LEVEL DISCOUNTS				
Multi Line				
Multi Car				
Passive Restraint				
VEHICLE AND POLICY LEVEL SURCHARGES				



any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2	Vehicle 3
Model Year			
Make			
Model			
Vehicle Identification Number			
Registered Owner(s)			
Product Type			
Sub Product Type			
Rate Symbol			
Existing Damage			
Description			
Cause			
Salvaged/Rebuilt Title			
Reason			
Customized			
Description			
Amount			
Symbol			
Stated Amount			
Inspection			
Customary Operator			
Vehicle Use			

## Vehicle Level Coverages

Comprehensive	100	\$45.00	100	\$57.90	CNW	
Collision	500	\$101.20	500	\$110.50	CNW	
Property Damage	50000	\$73.00	50000	\$73.00	50000	\$73.00
Bodily Injury	100/300	\$158.80	100/300	\$158.80	100/300	\$182.70
Death Benefits	DB	\$0.50	DB	\$0.90		
Personal Injury Protection	FULL	\$58.80	FULL	\$64.80	FULL	\$83.10
Deductible Applies To						
Addl. Pers. Inj. Protection	CNW		CNW			
Loss of Use	CNW		CNW		CNW	
Towing & Labor (Auto)	T&L	\$1.30	T&L	\$1.30		
CB Coverage	CNW		CNW			
Personal Effects						
Total Vehicle Premium		\$434.20		\$484.70		\$298.80

## POLICY LEVEL COVERAGES

Uninsured Motorists - BI	100/300	\$94.60
Uninsured Motorists - PD	10000	INCLUDED
Policy Level Premium		\$94.60

## VEHICLE AND POLICY LEVEL DISCOUNTS

Affinity Group			
Multi Car			
Passive Restraint			

## VEHICLE AND POLICY LEVEL SURCHARGES

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## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2		
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				

## Vehicle Level Coverages

Comprehensive	ACV	\$31.30	ACV	\$36.90	
Collision	250	\$57.40	250	\$73.70	
Property Damage	50000	\$49.30	50000	\$37.70	
Bodily Injury	100/300	\$102.70	100/300	\$85.00	
Death Benefits	DB	\$0.30	DB	\$0.30	
Personal Injury Protection	FULL	\$39.70	FULL	\$34.10	
Deductible Applies To					
Addl. Pers. Inj. Protection	CNW		CNW		
Loss of Use	CNW		CNW		
Towing & Labor (Auto)	T&L	\$1.40	T&L	\$1.40	
CB Coverage	CNW		CNW		
Personal Effects					
Total Vehicle Premium		\$262.10		\$269.10	

## POLICY LEVEL COVERAGES

Uninsured Motorists - BI	15/30	\$43.00
Uninsured Motorists - PD	10000	INCLUDED
Policy Level Premium		\$43.00

## VEHICLE AND POLICY LEVEL DISCOUNTS

Long Term				
Multi Car				
Passive Restraint				

## VEHICLE AND POLICY LEVEL SURCHARGES

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# VIOLATIONS, ACCIDENT HISTORY

## VEHICLE AND COVERAGE INFORMATION

	<b>Vehicle 1</b>			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
<b>Vehicle Level Coverages</b>				
Comprehensive	250	\$41.40		
Collision	\$00	\$138.90		
Property Damage	25000	\$63.20		
Bodily Injury	25/50	\$109.00		
Death Benefits	DB	\$0.60		
Personal Injury Protection	FULL	\$62.30		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$19.50		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$436.30		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	25/50	\$27.80		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$27.80		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Passive Restraint				
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2	
Model Year	[REDACTED]	[REDACTED]	
Make	[REDACTED]	[REDACTED]	
Model	[REDACTED]	[REDACTED]	
Vehicle Identification Number	[REDACTED]	[REDACTED]	
Registered Owner(s)	[REDACTED]	[REDACTED]	
Product Type	[REDACTED]	[REDACTED]	
Sub Product Type	[REDACTED]	[REDACTED]	
Rate Symbol	[REDACTED]	[REDACTED]	
Existing Damage	[REDACTED]	[REDACTED]	
Description	[REDACTED]	[REDACTED]	
Cause	[REDACTED]	[REDACTED]	
Salvaged/Rebuilt Title	[REDACTED]	[REDACTED]	
Reason	[REDACTED]	[REDACTED]	
Customized	[REDACTED]	[REDACTED]	
Description	[REDACTED]	[REDACTED]	
Amount	[REDACTED]	[REDACTED]	
Symbol	[REDACTED]	[REDACTED]	
Stated Amount	[REDACTED]	[REDACTED]	
Inspection	[REDACTED]	[REDACTED]	
Customary Operator	[REDACTED]	[REDACTED]	
Vehicle Use	[REDACTED]	[REDACTED]	

## Vehicle Level Coverages

Comprehensive	50	\$57.00	50	\$40.60
Collision	CNW		100	\$84.80
Property Damage	50000	\$133.40	50000	\$59.50
Bodily Injury	100/300	\$293.40	100/300	\$127.80
Death Benefits	DB	\$1.50	DB	\$0.70
Personal Injury Protection	FULL	\$153.80	FULL	\$80.50
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW		CNW	
Loss of Use	CNW		CNW	
Towing & Labor (Auto)	CNW		CNW	
CB Coverage	CNW		CNW	
Personal Effects				
Total Vehicle Premium		\$639.10		\$393.90

## POLICY LEVEL COVERAGES

Uninsured Motorists - BI	100/300	\$86.00
Uninsured Motorists - PD	10000	INCLUDED
Policy Level Premium		\$86.00

## VEHICLE AND POLICY LEVEL DISCOUNTS

Affinity Group	[REDACTED]	[REDACTED]
Multi Car	[REDACTED]	[REDACTED]
Passive Restraint	[REDACTED]	[REDACTED]

## VEHICLE AND POLICY LEVEL SURCHARGES

N	[REDACTED]
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VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	100	\$55.10		
Collision	500	\$74.20		
Property Damage	50000	\$56.70		
Bodily Injury	100/300	\$121.90		
Death Benefits	DB	\$0.40		
Personal Injury Protection	FULL	\$51.20		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	CNW			
Towing & Labor (Auto)	T&L	\$1.30		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$360.80		
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI	100/300	\$46.00		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$46.00		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Affinity Group				
Passive Restraint				
VEHICLE AND POLICY LEVEL SURCHARGES				

## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

Vehicle 1			
Model Year			
Make			
Model			
Vehicle Identification Number			
Registered Owner(s)			
Product Type			
Sub Product Type			
Rate Symbol			
Existing Damage			
Description			
Cause			
Salvaged/Rebuilt Title			
Reason			
Customized			
Description			
Amount			
Symbol			
Stated Amount			
Inspection			
Customary Operator			
Vehicle Use			
Vehicle Level Coverages			
Comprehensive	100	\$34.40	
Collision	CNW		
Property Damage	100000	\$49.30	
Bodily Injury	300/300	\$112.30	
Death Benefits	DB	\$0.50	
Personal Injury Protection	FULL	\$48.90	
Deductible Applies To			
Addl. Pers. Inj. Protection	CNW		
Loss of Use	30/900	\$19.50	
Towing & Labor (Auto)	T&L	\$1.40	
CB Coverage	CNW		
Personal Effects			
Total Vehicle Premium		\$266.30	
POLICY LEVEL COVERAGES			
Uninsured Motorists - BI	300/300	\$78.30	
Uninsured Motorists - PD	10000	INCLUDED	
Policy Level Premium		\$78.30	
VEHICLE AND POLICY LEVEL DISCOUNTS			
Long Term			
Multi Car			
VEHICLE AND POLICY LEVEL SURCHARGES			

## VIOLATIONS, ACCIDENT HISTORY

How many claims to an insurer have you or any operators of your vehicle(s) submitted in the last 35 months for comp/unattended collision losses (e.g. theft, vandalism, glass, etc.)? Does not include Towing & Labor.

1

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	250	\$27.30		
Collision	500	\$125.90		
Property Damage	50000	\$68.10		
Bodily Injury	100/300	\$153.10		
Death Benefits				
Personal Injury Protection	FULL	\$43.60		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	40/1100	\$25.20		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$441.60		
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI	100/300	\$52.30		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$52.30		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Passive Restraint				
VEHICLE AND POLICY LEVEL SURCHARGES				

VIOLATIONS, ACCIDENT HISTORY  
[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type	[REDACTED]			
Rate Symbol	[REDACTED]			
Existing Damage	[REDACTED]			
Description	[REDACTED]			
Cause	[REDACTED]			
Salvaged/Rebuilt Title	[REDACTED]			
Reason	[REDACTED]			
Customized	[REDACTED]			
Description	[REDACTED]			
Amount	[REDACTED]			
Symbol	[REDACTED]			
Stated Amount	[REDACTED]			
Inspection	[REDACTED]			
Customary Operator	[REDACTED]			
Vehicle Use	[REDACTED]			
<b>Vehicle Level Coverages</b>				
Comprehensive	100	\$23.50		
Collision	250	\$111.10		
Property Damage	100000	\$69.90		
Bodily Injury	250/500	\$163.50		
Death Benefits				
Personal Injury Protection	FULL	\$47.70		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNWX			
Loss of Use	30/900	\$17.40		
Towing & Labor (Auto)	T&L	\$1.20		
CB Coverage	CNWX			
Personal Effects				
Total Vehicle Premium		\$434.30		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	250/500	\$63.80		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$63.80		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Multi Line	[REDACTED]			
Affinity Group	[REDACTED]			
Passive Restraint	[REDACTED]			
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				
[REDACTED]				



Home Office:  
One Nationwide Plaza  
Columbus, OH 43215-2220

POLICY NUMBER [REDACTED]

COVERAGES

VEH 1

COMPREHENSIVE

250

\$14.20

COLLISION

1000

\$39.40

BODILY INJURY

100/300

\$138.30

PROPERTY DAMAGE

100000

\$63.00

PERSONAL INJURY PROTECTION

FULL

\$63.50

TOWING &amp; LABOR

\$1.50

TOTAL PREMIUM:

\$319.90

\*\*\*\*\*

## POLICY COVERAGE

UNINSURED MOTORIST-BODILY INJURY

50/100

\$36.80

UNINSURED MOTORIST-PROPERTY DAMAGE

10,000

INCLUDED

\*\*\*\*\*

TERM PREMIUM: \$356.70

INSTALLMENT PREMIUM: \$182.35

PAY PLAN: S

AMOUNT COLLECTED: \$356.70





Home Office:  
One Nationwide Plaza  
Columbus, OH 43215-2220

**AUTO POLICY CHANGE REQUEST**

DATE PREPARED: 10/25/04  
CHANGE EFF DATE: 10/25/04  
POLICY EFF DATE: 06/03/04  
POLICY EXP DATE: 12/03/04

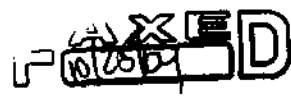
POLICY NUMBER: [REDACTED]  
POLICY HOLDER: [REDACTED]

THE UNDERSIGNED COMPANY AGREES TO EXTEND THE FOLLOWING COVERAGES AS RESPECTS THE DESCRIBED AUTOMOBILE(S) COMMENCING ON THE CHANGE EFFECTIVE DATE INDICATED, PENDING THE ISSUANCE OF A NEW DECLARATION PAGE OR THE EARLIER TERMINATION OF THESE COVERAGE(S) BY THE COMPANY OR THE POLICYHOLDER. THIS EXTENSION OF INSURANCE SHALL BE IN ACCORDANCE WITH THE TERMS OF THE COMPANY'S AUTO INSURANCE POLICIES AND MANUAL OF RATES AND CLASSIFICATIONS APPLICABLE IN THE STATE ON THE CHANGE EFFECTIVE DATE OF THIS CHANGE REQUEST. THIS COVERAGE MAY BE CANCELLED BY THE COMPANY BY MAILING WRITTEN NOTICE TO THE POLICYHOLDER STATING WHEN IN ACCORDANCE WITH ANY STATUTES OR POLICY TERMS SUCH CANCELLATION SHALL BE EFFECTIVE.

**NATIONWIDE MUTUAL INSURANCE COMPANY (23787)**

VEHICLE #1  
[REDACTED]  
[REDACTED]

COMPREHENSIVE	250
COLLISION	1000
PROPERTY DAMAGE	100000
BODILY INJURY	100/300
PERSONAL INJURY PROTECTION	FULL
TOWING AND LABOR	T&L
POLICY COVERAGE	
UNINSURED MOTORIST--BODILY INJURY	50/100
UNINSURED MOTORIST--PROPERTY DAMAGE	10000



*Glenn W. Deaton*  
\_\_\_\_\_  
GLENN W. DEATON 11943  
905-A N. DUPONT HWY  
DOVER, DE 19901  
PHONE (302) 734-3700

*10/25/04*  
\_\_\_\_\_  
DATE

CHECKS AND DRAFTS ARE RECEIVED SUBJECT TO COLLECTION ONLY.

[REDACTED]  
[REDACTED]  
[REDACTED]

VIOLATIONS, ACCIDENT HISTORY  
[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2		
Model Year	[REDACTED]	[REDACTED]		
Make	[REDACTED]	[REDACTED]		
Model	[REDACTED]	[REDACTED]		
Vehicle Identification Number	[REDACTED]	[REDACTED]		
Registered Owner(s)	[REDACTED]	[REDACTED]		
Product Type	[REDACTED]	[REDACTED]		
Sub Product Type				
Rate Symbol	[REDACTED]	[REDACTED]		
Existing Damage				
Description	[REDACTED]	[REDACTED]		
Cause				
Salvaged/Rebuilt Title				
Reason	[REDACTED]	[REDACTED]		
Customized				
Description	[REDACTED]	[REDACTED]		
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use	[REDACTED]	[REDACTED]		
Vehicle Level Coverages				
Comprehensive	CNW	CNW		
Collision	CNW	CNW		
Property Damage	100000	\$79.90	100000	\$79.90
Bodily Injury	50/100	\$147.70	50/100	\$153.60
Death Benefits	DB	\$0.70	DB	\$0.50
Personal Injury Protection	FULL	\$109.50	FULL	\$84.50
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW	CNW		
Loss of Use	CNW	CNW		
Towing & Labor (Auto)	CNW	CNW		
CB Coverage	CNW	CNW		
Personal Effects				
Total Vehicle Premium		\$337.80		\$318.50
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI		50/100		\$110.20
Uninsured Motorists - PD		10000		INCLUDED
Policy Level Premium				\$110.20
VEHICLE AND POLICY LEVEL DISCOUNTS				
Multi Line	[REDACTED]	[REDACTED]		
Long Term	[REDACTED]	[REDACTED]		
Multi Car	[REDACTED]	[REDACTED]		
Passive Restraint	[REDACTED]	[REDACTED]		
VEHICLE AND POLICY LEVEL SURCHARGES				
[REDACTED]				

**VIOLATIONS, ACCIDENT HISTORY**

No accidents or violations disclosed.

**VEHICLE AND COVERAGE INFORMATION**

	<b>Vehicle 1</b>			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
<b>Vehicle Level Coverages</b>				
Comprehensive	100	\$150.70		
Collision	200	\$640.20		
Property Damage	50000	\$271.80		
Bodily Injury	25/50	\$475.10		
Death Benefits	DB	\$1.80		
Personal Injury Protection	FULL	\$220.40		
Deductible Applies To	CNW			
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$17.50		
Towing & Labor	T&L	\$1.50		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$1778.00		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	25/50	\$43.60		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$43.60		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Defensive Driver				
Long Term				
Multi Car				
Passive Restraint				
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

## AUTO MEMORANDUM OF INSURANCE

POLICY NUMBER: [REDACTED]

POLICY EFF DATE: 03/23/04

POLICY HOLDER: [REDACTED]

POLICY EXP DATE: 09/23/04

## IMPORTANT NOTICE

THIS MEMORANDUM OF INSURANCE PROVIDES BASIC INFORMATION REGARDING COVERAGE AND INTERESTS PROTECTED BY YOUR POLICY AS OF 11/10/04.

## NATIONWIDE MUTUAL INSURANCE COMPANY (23787)

## VEHICLE #1

[REDACTED]

COMPREHENSIVE	ACV
COLLISION	200
PROPERTY DAMAGE	100000
BODILY INJURY	100/300
DEATH BENEFITS	DB
PERSONAL INJURY PROTECTION	FULL
LOSS OF USE	30/900
TOWING AND LABOR	T&L

## POLICY COVERAGE

UNINSURED MOTORIST--BODILY INJURY	100/300
UNINSURED MOTORIST--PROPERTY DAMAGE	10000

THIRD PARTY: [REDACTED]

[REDACTED]

*Lisa Broadbent*  
 LISA BROADBENT INS INC  
 20 Polly Drummond Hill Rd  
 Newark, DE 19711  
 PHONE (302) 731-0044

6693

DATE

[REDACTED]

## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type	[REDACTED]			
Rate Symbol	[REDACTED]			
Existing Damage	[REDACTED]			
Description	[REDACTED]			
Cause	[REDACTED]			
Salvaged/Rebuilt Title	[REDACTED]			
Reason	[REDACTED]			
Customized	[REDACTED]			
Description	[REDACTED]			
Amount	[REDACTED]			
Symbol	[REDACTED]			
Stated Amount	[REDACTED]			
Inspection	[REDACTED]			
Customary Operator	[REDACTED]			
Vehicle Use	Work			
<b>Vehicle Level Coverages</b>				
Comprehensive	500	\$44.30		
Collision	500	\$146.50		
Property Damage	100000	\$93.20		
Bodily Injury	300/300	\$248.90		
Death Benefits	DB	\$0.60		
Personal Injury Protection	FULL	\$126.80		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$19.50		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$681.20		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	300/300	\$116.10		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$116.10		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Passive Restraint	[REDACTED]			
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				
[REDACTED]				

## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type	[REDACTED]			
Rate Symbol	[REDACTED]			
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator	[REDACTED]			
Vehicle Use	[REDACTED]			
<b>Vehicle Level Coverages</b>				
Comprehensive	ACV	\$104.80		
Collision	100	\$166.30		
Property Damage	100000	\$100.90		
Bodily Injury	300/300	\$239.90		
Death Benefits	DB	\$0.50		
Personal Injury Protection	FULL	\$70.10		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$16.80		
Towing & Labor (Auto)	T&L	\$1.20		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$700.30		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	300/300	\$81.80		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$81.80		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Long Term	[REDACTED]			4
Affinity Group	[REDACTED]			
Passive Restraint	[REDACTED]			
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				
[REDACTED]				

## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
<b>Vehicle Level Coverages</b>				
Comprehensive	ACV	\$130.10		
Collision	250	\$254.20		
Property Damage	100000	\$79.90		
Bodily Injury	300/300	\$213.20		
Death Benefits	DB	\$0.50		
Personal Injury Protection	FULL	\$106.80		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$17.40		
Towing & Labor (Auto)	T&L	\$1.20		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$803.30		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	300/300	\$103.30		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$103.30		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Multi Line				
Long Term				
Affinity Group				
Multi Car				
Passive Restraint				
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code
[REDACTED]	[REDACTED]		[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]		[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]		[REDACTED]	[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

Vehicle 1				
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type				
Rate Symbol	[REDACTED]			
Existing Damage				
Description	[REDACTED]			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator	[REDACTED]			
Vehicle Use	[REDACTED]			
<b>Vehicle Level Coverages</b>				
Comprehensive	250	\$54.20		
Collision	500	\$148.40		
Property Damage	25000	\$78.30		
Bodily Injury	25/50	\$140.20		
Death Benefits	DB	\$0.50		
Personal Injury Protection	FULL	\$77.20		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	25/800	\$14.10		
Towing & Labor (Auto)	T&L	\$1.20		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$514.10		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	25/50	\$39.70		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$39.70		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Multi Line	[REDACTED]			
Affinity Group	[REDACTED]			
Passive Restraint	[REDACTED]			
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				
[REDACTED]				



## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
<b>Vehicle Level Coverages</b>				
Comprehensive	100	\$52.20		
Collision	500	\$128.20		
Property Damage	100000	\$87.60		
Bodily Injury	100/300	\$198.90		
Death Benefits	DB	\$0.40		
Personal Injury Protection	FULL	\$56.50		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	25/800	\$16.60		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$541.80		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	100/300	\$74.70		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$74.70		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Multi Line				
Passive Restraint				
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
<b>Vehicle Level Coverages</b>				
Comprehensive	100	\$138.20		
Collision	1000	\$152.70		
Property Damage	100000	\$78.40		
Bodily Injury	500/500	\$206.00		
Death Benefits	DB	\$0.50		
Personal Injury Protection	FULL	\$61.30		
Deductible Applies To	CNW			
Addl. Pers. Inj. Protection	CNW			
Loss of Use	25/800	\$14.90		
Towing & Labor	T&L	\$1.50		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$653.50		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	500/500		\$104.40	
Uninsured Motorists - PD	10000		INCLUDED	
Policy Level Premium			\$104.40	
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Defensive Driver				
Home And Car				
Long Term				
Multi Car				
Passive Restraint				
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1	Vehicle 2		
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description				
Cause				
Salvaged/Rebuilt Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use	Pleasure	Pleasure		
<b>Vehicle Level Coverages</b>				
Comprehensive	CNW	500	\$13.80	
Collision	CNW	500	\$62.00	
Property Damage	10000	\$59.70	10000	\$52.50
Bodily Injury	15/30	\$90.40	15/30	\$79.50
Death Benefits	DB	\$0.50	DB	\$0.40
Personal Injury Protection	FULL	\$52.40	FULL	\$46.10
Deductible Applies To	CNW	CNW		
Addl. Pers. Inj. Protection	CNW	CNW		
Loss of Use	CNW	30/900	\$17.50	
Towing & Labor	T&L	\$1.50	T&L	\$1.50
CB Coverage	CNW	CNW		
Personal Effects				
Total Vehicle Premium		\$204.50	\$273.30	
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI		15/30	\$72.50	
Uninsured Motorists - PD		10000	INCLUDED	
Policy Level Premium			\$72.50	
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Defensive Driver	Yes	Yes		
Long Term	Yes	Yes		
Multi Car	Yes	Yes		
Annual Mileage	Yes	Yes		
Passive Restraint	Yes	Yes		
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

Cause				
Salvage/Reason Title				
Reason				
Customized				
Description				
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use	Work			
<b>Vehicle Level Coverages</b>				
Comprehensive	250	\$53.60		
Collision	500	\$131.30		
Property Damage	50000	\$84.20		
Bodily Injury	100/300	\$193.30		
Death Benefits	DB	\$0.40		
Personal Injury Protection	FULL	\$89.60		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	CNW			
Towing & Labor (Auto)	CNW			
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$532.40		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	100/300	\$72.60		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$72.60		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Passive Restraint				
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

Policy Number: [REDACTED]

## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type	[REDACTED]			
Rate Symbol	[REDACTED]			
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection	Inspection Complete			
Customary Operator	[REDACTED]			
Vehicle Use	[REDACTED]			
<b>Vehicle Level Coverages</b>				
Comprehensive	250	\$36.40		
Collision	500	\$98.20		
Property Damage	100000	\$71.00		
Bodily Injury	300/300	\$188.90		
Death Benefits	DB	\$0.50		
Personal Injury Protection	FULL	\$95.50		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	25/800	\$16.60		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$508.50		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	300/300	\$116.10		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$116.10		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Multi Line	[REDACTED]			
Long Term	[REDACTED]			
Passive Restraint	[REDACTED]			
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				
[REDACTED]				

POLICY NUMBER [REDACTED]

COVERAGES

VEH 1

COMPREHENSIVE	100	\$69.80
COLLISION	500 *	\$159.60
BODILY INJURY	100/300	\$215.90
PROPERTY DAMAGE	100000	\$83.30
DEATH BENEFITS	DB	\$ .50
PERSONAL INJURY PROTECTION	FULL	\$57.30
LOSS OF USE	BROAD	\$12.00
TOWING & LABOR		\$1.50
TOTAL PREMIUM:		<u>\$599.90</u>

\*\*\*\*\*

POLICY COVERAGE		
UNINSURED MOTORIST-BODILY INJURY	100/300	\$77.10
UNINSURED MOTORIST-PROPERTY DAMAGE	10,000	INCLUDED

\*\*\*\*\*

TERM PREMIUM: \$677.00  
 PAY PLAN: O

INSTALLMENT PREMIUM: \$341.50  
 AMOUNT COLLECTED: \_\_\_\_\_

A03 AUTO RATE QUOTE #1 - COVERAGES EFF DATE 08/29/01  
 NAME: [REDACTED] ST DE AGT ID A \*MEMO\*

COMP	100	69.80
COLL	500	159.60
PD	100000	83.30
BI	100/300	215.90
DB	DB	.50
UMBI	100/300	77.10
UMPD	10000	INCL
PIP	FULL	57.30

INSD		
APIP	CNW	
LOU	BROAD	12.00
T&L	T&L	1.50
CB	CNW	

PE  
 TOTAL 677.00

DR:CG:ADLT [REDACTED]:N:N

RF/SC/TIER 1.05/00/01

BY: SX:MS:P/O [REDACTED]

USE:RS [REDACTED]

DISCOUNT [REDACTED]

CURRENT TOTL/INST \$677.00 / \$341.50

<PREV PG> CLASS <NEXT PG> QUOTE #2 <TAB> CHANGE

<GO> TO SELECT QUOTE #1

*15th of the month.*

*Ne*

*\$12.83/mo.*

[REDACTED]

[REDACTED]

**VIOLATIONS, ACCIDENT HISTORY**

No accidents or violations disclosed.

**VEHICLE AND COVERAGE INFORMATION**

	<b>Vehicle 1</b>			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type	[REDACTED]			
Rate Symbol	[REDACTED]			
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator	[REDACTED]			
Vehicle Use	[REDACTED]			
<b>Vehicle Level Coverages</b>				
Comprehensive	500	\$34.40		
Collision	1000	\$77.40		
Property Damage	50000	\$94.90		
Bodily Injury	50/100	\$203.20		
Death Benefits	DB	\$0.50		
Personal Injury Protection	FULL	\$93.60		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	CNW			
Towing & Labor (Auto)	CNW			
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$504.00		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	50/100	\$78.30		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$78.30		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Multi Line	[REDACTED]			
Passive Restraint	[REDACTED]			
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				
[REDACTED]				



## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	250	\$53.20		
Collision	500	\$163.90		
Property Damage	100000	\$99.90		
Bodily Injury	50/100	\$202.10		
Death Benefits	DB	\$0.50		
Personal Injury Protection	FULL	\$76.50		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$20.70		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$618.20		
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI	50/100	\$57.90		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$57.90		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Long Term				
Multi Car				
Passive Restraint				
VEHICLE AND POLICY LEVEL SURCHARGES				

## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1		
Model Year			
Make			
Model			
Vehicle Identification Number			
Registered Owner(s)			
Product Type			
Sub Product Type			
Rate Symbol			
Existing Damage			
Description	None		
Cause			
Salvaged/Rebuilt Title			
Reason	Not Applicable		
Customized			
Description	None		
Amount			
Symbol			
Stated Amount			
Inspection			
Customary Operator			
Vehicle Use			

## Vehicle Level Coverages

Comprehensive	250	\$58.70	
Collision	500	\$230.00	
Property Damage	100000	\$92.40	
Bodily Injury	50/100	\$180.00	
Death Benefits	DB	\$0.40	
Personal Injury Protection	FULL	\$60.10	
Deductible Applies To			
Addl. Pers. Inj. Protection	CNW		
Loss of Use	30/900	\$17.60	
Towing & Labor (Auto)	T&L	\$1.20	
CB Coverage	CNW		
Personal Effects			
Total Vehicle Premium		\$640.40	

## POLICY LEVEL COVERAGES

Uninsured Motorists - BI	50/100	\$49.20
Uninsured Motorists - PD	10000	INCLUDED
Policy Level Premium		\$49.20

## VEHICLE AND POLICY LEVEL DISCOUNTS

Long Term			
Affinity Group			
Multi Car			
Passive Restraint			

## VEHICLE AND POLICY LEVEL SURCHARGES

--	--	--	--

POLICY NUMBER [REDACTED]

COVERAGES

VEH 1

BODILY INJURY	50/100 \$386.90
PROPERTY DAMAGE	100000 \$190.10
DEATH BENEFITS	DB \$2.10
PERSONAL INJURY PROTECTION	FULL \$247.30
TOWING & LABOR	\$1.50
TOTAL PREMIUM:	<u>\$827.90</u>

\*\*\*\*\*

POLICY COVERAGE

UNINSURED MOTORIST-BODILY INJURY	50/100	\$53.60
UNINSURED MOTORIST-PROPERTY DAMAGE	10,000	INCLUDED

\*\*\*\*\*

TERM PREMIUM: \$881.50  
PAY PLAN: S

INSTALLMENT PREMIUM: \$444.75  
AMOUNT COLLECTED: \$504.00

POLICY NUMBER [REDACTED]

COVERAGES

VEH 2

COMPREHENSIVE	100	\$60.90
COLLISION	100	\$118.30
BODILY INJURY	100/300	\$185.10
PROPERTY DAMAGE	100000	\$71.50
DEATH BENEFITS	DB	\$ .50
PERSONAL INJURY PROTECTION	FULL	\$59.00
LOSS OF USE	BROAD	\$12.00
TOWING & LABOR		\$1.50
TOTAL PREMIUM:		<u>\$508.80</u>

\*\*\*\*\*

POLICY COVERAGE		
UNINSURED MOTORIST-BODILY INJURY	100/300	\$77.10
UNINSURED MOTORIST-PROPERTY DAMAGE	10,000	INCLUDED

\*\*\*\*\*

TERM PREMIUM: \$585.90  
 PAY PLAN: O

INSTALLMENT PREMIUM: \$296.95  
 AMOUNT COLLECTED: 184.22

*for both.*

A03 AUTO RATE QUOTE #1 - COVERAGES EFF DATE 10/22/01  
 NAME: [REDACTED] ST DE AGT ID A

	[REDACTED]	008	[REDACTED]	008
COMP	CNW		100	60.90
COLL	CNW		100	118.30
PD	100000	87.80	100000	71.50
BI	100/300	227.30	100/300	185.10
DB	DB	1.00	DB	.50
UMBI	100/300	158.30	100/300	0.00
UMPD	10000	INCL	10000	INCL
PIP	FULL	120.60	FULL	59.00
INSD				
APIP	CNW		CNW	
LOU	CNW		BROAD	12.00
T&L	T&L	1.50	T&L	1.50
CB	CNW		CNW	
PE				
TOTAL		596.50	TOTAL	508.80
DR:CG:ADLT	[REDACTED]:N:N		[REDACTED]:N:N	
RF/SC/TIER	.85/00/03		.90/00/01	
BY: SX:MS:P/O	[REDACTED]		[REDACTED]	
USE:RS	[REDACTED]		[REDACTED]	
DISCOUNT	HC,MC		HC,MC,PR	
CURRENT TOTL/INST	\$1105.30 / \$556.65			
<PREV PG> CLASS <NEXT PG> QUOTE #2 <TAB> CHANGE				

<GO> TO SELECT QUOTE #1

A03 AUTO RATE QUOTE #1 - COVERAGES EFF DATE 10/22/01  
 NAME: [REDACTED] ST DE AGT ID A

COMP	CNW	250	44.20
COLL	CNW	250	107.60
PD	100000	67.50	100000 71.50
BI	100/300	174.80	100/300 185.10
DB	DB	.80	DB .50
UMBI	100/300	143.90	100/300 0.00
UMPD	10000	INCL	10000 INCL
PIP	FULL	92.70	FULL 59.00
INSD			
APIP	CNW	CNW	
LOU	CNW	BROAD	12.00
T&L	T&L	1.50	T&L 1.50
CB	CNW	CNW	
PE			

TOTAL 481.20 TOTAL 481.40

DR:CG:ADLT [REDACTED]:N:N [REDACTED]:N:N

RF/SC/TIER .85/00/01 .90/00/01

BY:SX:MS:P/O [REDACTED] [REDACTED]

USE:RS [REDACTED] [REDACTED]

DISCOUNT [REDACTED] [REDACTED]

CURRENT TOTL/INST \$962.60 / \$485.30

<PREV PG> CLASS <NEXT PG> QUOTE #2 <TAB> CHANGE

<GO> TO SELECT QUOTE #1

## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1		Vehicle 2		
Model Year	[REDACTED]		[REDACTED]		
Make	[REDACTED]		[REDACTED]		
Model	[REDACTED]		[REDACTED]		
Vehicle Identification Number	[REDACTED]		[REDACTED]		
Registered Owner(s)	[REDACTED]		[REDACTED]		
Product Type	[REDACTED]		[REDACTED]		
Sub Product Type	[REDACTED]		[REDACTED]		
Rate Symbol	[REDACTED]		[REDACTED]		
Existing Damage					
Description	None		None		
Cause					
Salvaged/Rebuilt Title					
Reason	Not Applicable		Not Applicable		
Customized					
Description	None		None		
Amount					
Symbol					
Stated Amount					
Inspection					
Customary Operator	[REDACTED]		[REDACTED]		
Vehicle Use	[REDACTED]		[REDACTED]		
<b>Vehicle Level Coverages</b>					
Comprehensive	250	\$55.90	250	\$56.60	
Collision	250	\$180.60	250	\$180.50	
Property Damage	100000	\$77.10	100000	\$77.10	
Bodily Injury	100/300	\$182.50	100/300	\$182.50	
Death Benefits	DB	\$0.60	DB	\$0.60	
Personal Injury Protection	FULL	\$84.30	FULL	\$84.30	
Deductible Applies To					
Addl. Pers. Inj. Protection	CNW		CNW		
Loss of Use	30/900	\$16.60	30/900	\$16.60	
Towing & Labor (Auto)	T&L	\$1.20	T&L	\$1.20	
CB Coverage	CNW		CNW		
Personal Effects					
Total Vehicle Premium		\$598.80		\$599.40	
<b>POLICY LEVEL COVERAGES</b>					
Uninsured Motorists - BI			100/300	\$118.60	
Uninsured Motorists - PD			10000	INCLUDED	
Policy Level Premium				\$118.60	
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>					
Affinity Group	[REDACTED]		[REDACTED]		
Multi Car	[REDACTED]		[REDACTED]		
Passive Restraint	[REDACTED]		[REDACTED]		
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>					
No vehicle / policy-level surcharges applied					

**VIOLATIONS-ACCIDENT HISTORY**

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

**VEHICLE AND COVERAGE INFORMATION**

	Vehicle 1	Vehicle 2	
Model Year			
Make			
Model			
Vehicle Identification Number			
Registered Owner(s)			
Product Type			
Sub Product Type			
Rate Symbol			
Existing Damage			
Description	None	None	
Cause			
Salvaged/Rebuilt Title			
Reason	Not Applicable	Not Applicable	
Customized			
Description	None	None	
Amount			
Symbol			
Stated Amount			
Inspection			
Customary Operator			
Vehicle Use			

**Vehicle Level Coverages**

Comprehensive	CNW	500	\$37.80
Collision	CNW	500	\$135.10
Property Damage	100000	\$81.90	100000 \$89.30
Bodily Injury	100/300	\$190.40	100/300 \$207.80
Death Benefits	DB	\$0.40	DB \$0.50
Personal Injury Protection	FULL	\$83.00	FULL \$106.50
Deductible Applies To			
Addl. Pers. Inj. Protection	CNW	CNW	
Loss of Use	CNW	30/900	\$18.00
Towing & Labor (Auto)	CNW	T&L	\$1.20
CB Coverage	CNW	CNW	
Personal Effects			
Total Vehicle Premium		\$355.70	\$596.20

**POLICY LEVEL COVERAGES**

Uninsured Motorists - BI	100/300	\$148.10
Uninsured Motorists - PD	10000	INCLUDED
Policy Level Premium		\$148.10

**VEHICLE AND POLICY LEVEL DISCOUNTS**

Affinity Group			
Multi Car			
Passive Restraint			

**VEHICLE AND POLICY LEVEL SURCHARGES**

No vehicle / policy-level surcharges applied



## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Rated Driver				
Vehicle Use				
Vehicle Level Coverages				
Comprehensive	500	\$129.40		
Collision	1000	\$320.00		
Property Damage	10000	\$208.70		
Bodily Injury	15/30	\$318.60		
Death Benefits				
Personal Injury Protection	FULL	\$210.90		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/600	\$18.00		
Towing & Labor (Auto)	T&L	\$4.30		
Special Equipment	CNW			
Personal Effects				
Total Vehicle Premium		\$1209.90		
POLICY LEVEL COVERAGES				
Uninsured Motorists - BI	15/30	\$49.00		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$49.00		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Passive Restraint				
VEHICLE AND POLICY LEVEL SURCHARGES				

## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use				

## Vehicle Level Coverages

Comprehensive	250	\$41.60		
Collision	500	\$133.20		
Property Damage	100000	\$88.10		
Bodily Injury	100/300	\$185.20		
Death Benefits	DB	\$0.50		
Personal Injury Protection	FULL	\$72.30		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$20.70		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$543.00		

## POLICY LEVEL COVERAGES

Uninsured Motorists - BI	100/300	\$75.30		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$75.30		

## VEHICLE AND POLICY LEVEL DISCOUNTS

Multi Line				
Passive Restraint				

## VEHICLE AND POLICY LEVEL SURCHARGES

No vehicle / policy-level surcharges applied				
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## VIOLATIONS, ACCIDENT HISTORY

No accidents or violations disclosed.

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year	[REDACTED]			
Make	[REDACTED]			
Model	[REDACTED]			
Vehicle Identification Number	[REDACTED]			
Registered Owner(s)	[REDACTED]			
Product Type	[REDACTED]			
Sub Product Type	[REDACTED]			
Rate Symbol	[REDACTED]			
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator	[REDACTED]			
Vehicle Use	[REDACTED]			
<b>Vehicle Level Coverages</b>				
Comprehensive	250	\$56.40		
Collision	500	\$149.30		
Property Damage	25000	\$77.00		
Bodily Injury	25/50	\$149.90		
Death Benefits	DB	\$0.40		
Personal Injury Protection	FULL	\$81.60		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$18.00		
Towing & Labor (Auto)	T&L	\$1.20		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$533.80		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	25/50	\$49.20		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$49.20		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Affinity Group	[REDACTED]			
Multi Car	[REDACTED]			
Passive Restraint	[REDACTED]			
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				
No vehicle / policy-level surcharges applied				

**No accidents or violations disclosed.**

**VEHICLE AND COVERAGE INFORMATION**

	Vehicle 1			
Model Year	2008			
Make	BMW			
Model	328i			
Vehicle Identification Number	WBA3A5C57D0000000			
Registered Owner(s)	John Doe			
Product Type	Passenger Vehicle			
Sub Product Type				
Rate Symbol	D20 D20			
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Vehicle Level Coverages				
Comprehensive	400	\$50.40		
Accessories	CNW			
Collision	900	\$156.60		
Bodily Injury	15/30	\$210.60		
Property Damage	10000	\$127.80		
Uninsured Motorists	15/30	\$45.60		
Uninsured Motorists - PD	10000	INCLUDED		
Personal Injury Protection	FULL	\$150.80		
Deductible Applies To	CNW			
Addl. Pers. Inj. Protection	CNW			
Loss of Use	CNW			
Total Vehicle Premium		\$741.60		
VEHICLE AND POLICY LEVEL DISCOUNTS				
Defensive Driver	Yes			
Transfer Credit	Yes			
Multi Car	Yes			
VEHICLE AND POLICY LEVEL SURCHARGES				
No vehicle / policy-level surcharges applied				

## VIOLATIONS, ACCIDENT HISTORY

Have you, any licensed drivers in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any injury claims during the past 35 months?

Name	Occurrence Date	Conviction Date	Description	Violation/Accident Code

## VEHICLE AND COVERAGE INFORMATION

	Vehicle 1			
Model Year				
Make				
Model				
Vehicle Identification Number				
Registered Owner(s)				
Product Type				
Sub Product Type				
Rate Symbol				
Existing Damage				
Description	None			
Cause				
Salvaged/Rebuilt Title				
Reason	Not Applicable			
Customized				
Description	None			
Amount				
Symbol				
Stated Amount				
Inspection				
Customary Operator				
Vehicle Use	Work			
<b>Vehicle Level Coverages</b>				
Comprehensive	250	\$42.30		
Collision	500	\$117.30		
Property Damage	100000	\$104.10		
Bodily Injury	50/100	\$219.10		
Death Benefits	DB	\$0.70		
Personal Injury Protection	FULL	\$103.60		
Deductible Applies To				
Addl. Pers. Inj. Protection	CNW			
Loss of Use	30/900	\$20.70		
Towing & Labor (Auto)	T&L	\$1.40		
CB Coverage	CNW			
Personal Effects				
Total Vehicle Premium		\$609.20		
<b>POLICY LEVEL COVERAGES</b>				
Uninsured Motorists - BI	50/100	\$57.90		
Uninsured Motorists - PD	10000	INCLUDED		
Policy Level Premium		\$57.90		
<b>VEHICLE AND POLICY LEVEL DISCOUNTS</b>				
Passive Restraint				
<b>VEHICLE AND POLICY LEVEL SURCHARGES</b>				

VIOLATIONS, ACCIDENT HISTORY  
[REDACTED]

## VEHICLE AND COVERAGE INFORMATION

			Vehicle 2		
Model Year	[REDACTED]		[REDACTED]		
Make	[REDACTED]		[REDACTED]		
Model	[REDACTED]		[REDACTED]		
Vehicle Identification Number	[REDACTED]		[REDACTED]		
Registered Owner(s)	[REDACTED]		[REDACTED]		
Product Type	[REDACTED]		[REDACTED]		
Sub Product Type					
Rate Symbol	[REDACTED]		[REDACTED]		
Existing Damage					
Description	[REDACTED]		[REDACTED]		
Cause					
Salvaged/Rebuilt Title					
Reason	[REDACTED]		[REDACTED]		
Customized					
Description	[REDACTED]		[REDACTED]		
Amount					
Symbol					
Stated Amount					
Inspection					
Customary Operator	[REDACTED]		[REDACTED]		
Vehicle Use	[REDACTED]		[REDACTED]		
Vehicle Level Coverages					
Comprehensive	250	\$42.60	CNW		
Collision	250	\$175.00	CNW		
Property Damage	10000	\$70.10	10000	\$67.40	
Bodily Injury	15/30	\$108.10	15/30	\$112.10	
Death Benefits	DB	\$0.40	DB	\$0.60	
Personal Injury Protection	FULL	\$86.70	FULL	\$122.30	
Deductible Applies To					
Addl. Pers. Inj. Protection	CNW		CNW		
Loss of Use	CNW		CNW		
Towing & Labor (Auto)	T&L	\$1.40			
CB Coverage	CNW		CNW		
Personal Effects					
Total Vehicle Premium		\$484.30		\$302.40	
POLICY LEVEL COVERAGES					
Uninsured Motorists - BI		15/30		\$95.70	
Uninsured Motorists - PD		10000		INCLUDED	
Policy Level Premium				\$95.70	
VEHICLE AND POLICY LEVEL DISCOUNTS					
Multi Line	[REDACTED]		[REDACTED]		
Multi Car	[REDACTED]		[REDACTED]		
Passive Restraint	[REDACTED]		[REDACTED]		
VEHICLE AND POLICY LEVEL SURCHARGES					
[REDACTED]					